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ABSTRACT

This final report describes the Case Method of Instruction (CMI) Project, a project to develop, field test, and disseminate training materials to facilitate the use of the Case Method of Instruction by inservice and preservice instructors in developmental disabilities. CMI project activities focused on developing a collection of case stories and related training activities and materials for instructors in case method instructional strategies. The benefits of CMI are identified, including: an emphasis on problem-solving, use of real-life situations, and active student participation. The 23 case stories developed address three major areas of training: working with families, interdisciplinary and interagency collaboration, and child-level interventions. Instructional materials for the case studies include role plays, discussion questions, small group activities, team simulations, and written assignments. Field tests indicated the case studies and training materials were perceived to be of high quality and useful. Application of CMI in a preservice graduate course on families indicated students demonstrated a significant increase on measures of family-centeredness as a result of the course. Individual sections of the report address the project's goals and objectives, conceptual framework, logistical difficulties and departures from original plans, evaluation findings, impact, and future activities. Appendices include a field-test review form, a CMI survey form, and reviewers' comments. (CR)

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# The Case Method of Instruction (CMI) Project

## FINAL REPORT

**Office of Special Education Programs (Special Projects)**
**U.S. Department of Education**
**Grant Number: HO29K20065**
**CFDA: 84.029K**

**P.J. McWilliam, Ph.D. (Project Director)**
**Miki Kersgard (Case Writer)**
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**June 30, 1996**

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# Case Method of Instruction (CMI) Project
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## Abstract

The purpose of the Case Method of Instruction (CMI) Project was to develop, field-test, and disseminate training materials to facilitate the use of case method instruction by inservice and preservice instructors in the field of developmental disabilities. Two types of training materials were developed by the project: (a) a collection of case stories and related case study training activities for instructors involved in the training of early interventionists across the various disciplines and (b) materials for guiding instructors in case method instructional strategies.

Three major areas of training content are covered by project-developed case stories and related training materials. These are: (a) working with families, (b) interdisciplinary and interagency collaboration, and (c) child-level interventions. The case stories are based on the actual experiences of families and professionals involved in early intervention and were developed through site visits, interviews, observations, and sanctioned reviews of case records. In addition to the case stories, instructional materials (e.g., role-plays, discussion questions, small group activities, team simulations, and written assignments) have been developed for each case. The variety of issues addressed by the project's case stories provide instructors, and the variations in child professional, and setting characteristics across stories, make the collection suitable for use by instructors across the professional disciplines that are involved in early intervention.

Project-developed training materials were reviewed and field-tested by numerous presevice and inservice instructors (*field-test reviewers*) across the United States. Feedback from field-test reviewers was systematically collected and analyzed to evaluate the perceived quality and usefulness of project materials by potential consumers. Data from field-test reviewers indicated that the case stories were perceived to be of very high quality and beneficial for use in preservice and inservice trainingin early intervention. Furthermore, the field-test reviewers indicated that the case studies were appropriate for training audiences of diverse discipline backgrounds. Information from field-test reviewers was also used to guide the development of additional training materials.

An investigation was also conducted to determine the impact of case materials and case method instructional strategies in the preservice training of graduate students enrolled in classes with family-centered content. Four sections of a families course taught through the case method of instruction and all taught by the same instructor participated. Analysis of pre/post measures of family-centeredness (knowledge, attitude, and application skills) showed statistically significant and noteworthy changes in measures of family-centeredness as a function of case method instruction for all 4 sections of the course.

Wide-scale dissemination of project-developed materials was conducted as well as dissemination of case method instructional strategies and evaluation findings.

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# PROJECT GOALS AND OBJECTIVES

The major goals and objectives for the CMI Project were as follows:

**GOAL #1: To develop case studies and related training materials appropriate for use in case method instruction for early intervention personnel.**

**Objectives:**

1.1 To determine the types of cases or situations in early intervention that present difficulty for students or trainees to apply the philosophical principles or techniques involved in the three content areas described above (i.e., working with families, interdisciplinary and interagency coordination, and child-level practices).

1.2 To identify, contact, and arrange for the collection of raw case information from appropriate resources (early intervention programs).

1.3 To conduct case investigations (interviews, observations, sanctioned review of records) and accumulate the necessary case information for case study writing.

1.4 To sort through and edit raw case material into finished case studies and related case materials.

1.5 To develop training activities (discussion questions, teaching notes, small group activities, written assignments) for each case which may be used by case method instructors.

1.6 To compile a collection of completed case studies and related training materials in a form that is suitable for dissemination.

**GOAL #2: To develop products designed to promote and facilitate the use of case method instruction in the preservice and inservice training of all professionals working with infants, preschoolers, and youth with developmental disabilities.**

**Objectives:**

2.1 To develop an instructor's guidebook for conducting case method training. This would include a brief rationale and overview of case method instruction, alternative methods of conducting case method instruction, how to select case sfor use with trainees, and guidelines for facilitating case discussions.

2.2 To develop instructions for the writing of case studies appropriate for use with the case method of instruction

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**GOAL #3: To conduct field-testing of case studies and training materials in both preservice and inservice settings.**

**Objectives:**

3.1 To distribute completed case studies and related training materials to a wide range of potential users and request feedback on content, format, usefulness, and the need for expansion of material content, changes in format, or additional materials needed.

3.2 To analyze feedback from initial distribution and make necessary revisions in the content and format of case training materials.

3.3 To sponsor several "focus groups" (e.g., university faculty, inservice training and technical assistance providers, families of special needs infants and preschoolers) to critically review the revised collection of case studies and training materials, to provide suggestions for mass dissemination, and determine the need for specific training in the use of materials.

3.4 To conduct direct observation of case study use in several diverse training situations (e.g., full use of case studies in university course, case studies embedded into existing coursework in various disciplines, use of case studies in inservice workshops, use of case studies in on-site inservice training).

**GOAL #4: To evaluate the effectiveness of case method instruction in training early intervention personnel at the preservice and inservice training levels.**

**Objectives:**

4.1 To document the number of requests for case studies and related training materials.

4.2 To document the various uses of case study training materials in preservice and inservice instruction (type of setting, percent of training time dedicated to case study use, characteristics of trainees involved in case method instruction, characteristics of instructors, learning objectives or training content, which materials were used and how).

4.3 To determine the perceived usefulness and practicality of case method materials by instructors across a variety of discipline backgrounds and types of training events.

4.4 To determine student and trainee satisfaction with the use of case method instruction and case study materials.

4.5 To conduct a small-scale evaluation study of case method instruction and materials use in preservice and inservice settings. This would involve the documentation of changes in

trainees' knowledge, attitudes, application skills, etc. as a direct result of the case method of instruction across the three areas of training content.

**GOAL #5: To disseminate and promote the use of case method instruction materials on a national level to others charged with the responsibility of providing inservice or preservice training to professionals serving infants, preschoolers, and youth with developmental disabilities.**

**Objectives:**

5.1 To conduct national dissemination efforts to promote awareness and interest in adopting the case method of instruction in preservice and inservice training of early intervention professionals (e g., journal articles, articles in newsletters, conference presentations, mailings).

5.2 To distribute case studies and case related training materials to professionals, programs or agencies who figure prominently in the national training efforts geared toward meeting the mandates for early intervention set forth in Public Law 99-457.

5.3 To announce the availability of case studies and related training materials to all involved in the training of early intervention personnel (preservice and inservice) through mailings to individuals and groups, announcements in key newsletters and journals, and through presentations and advertisements at national conferences.

5.4 To disseminate the evaluation efforts and results of the project regarding the satisfaction, usefulness, and effectiveness of the case method of instruction in preservice and inservice training.

5.5 To provide a limited number of training events to guide others in case method instruction techniques to promote its expanded use (i.e., training of key persons in early intervention personnel preparation).

# CONCEPTUAL FRAMEWORK FOR PROJECT

## *The Case Method Approach to Training*

There are several key elements of the case method of instruction which serve to differentiate it from the larger class of discussion methods of instruction. These are: (a) an emphasis on teaching the general skills of decision-making or problem-solving, (b) the use of real-life situations, and (c) active student participation in the learning process. A brief elaboration on each of these three key elements is provided next.

**An emphasis on problem-solving.** Difficulties in bridging the gap between theory and practice is a problem encountered by many professional schools in preparing their students for later life work (O'Connell & Bares, 1976; Kleinfeld, 1990; Rasinski, 1989; Scully, 1984; Smith, 1987). Instructors often attempt to pull reality into their lectures by providing examples of theory application in actual practice. Even this is not enough. The examples are often diluted or simplified to make a specific point and, therefore, do not mirror the complex nature of the situations that professionals are likely to encounter in the real world. We cannot possibly anticipate all of the many types of situations our students or trainees will face. We cannot provide them with recipes for dealing with all of the problems they will have to handle in their professional work. Rather, we must provide them with skills that enable them to figure out solutions to complex problems on their own. This is the very heart of the case method of instruction.

The importance of the students' or trainees' mastery of theory, fact, and specific skills or techniques is not denied. They are seen as being valuable, however only so far as the student is capable of employing them in problem-solving and decision-making. In case method instruction, the student is trained to sort through the facts of a complex situation, to identify problems when they are not immediately obvious, to analyze the various factors contributing to identified problems, to develop alternative solutions to problems, and to use sound judgement in deciding upon a course of action to follow. In short, the case method is concerned with teaching students to think for themselves and arrive at carefully reasoned solutions.

**Real-life situations.** The case study is the primary tool used by case method instructors. Case studies are factual accounts of real situations encountered by professionals in the workplace; complete with extraneous information, missing information, and conflicting values. It has been further proposed (Scully, 1984; Taylor & Wynn, 1984) that cases are most effective when they are presented in a way that allows the student to visualize the position of a decision-maker or group of decision-makers. Above all, case studies should not provide students or trainees with implicit or explicit solutions to the problem(s) presented. Rather, the good case should allow for several possible alternative solutions.

Case studies serve three major purposes in the teaching process. First, case studies provide the student with an experiential knowledge base (Kreps & Lederman, 1985; Smith, 1987). Case studies present real, complex situations for which there is no easy solution. "Thus when the student leaves school, events encountered bear a considerable similarity to his knowledge, making the transition from formal education much easier than if he has been studying theory per se." (Beckman, 1972, p. 491). Second, case studies serve as a motivator for student learning. Armed with the knowledge of the types of situations they are likely to face someday, the student is in a better position to understand the importance and practical applicability of theory, knowledge, and skills. Third, case studies serve as the raw material for teaching problem-solving skills. The complexity of case studies as well as the lack of obvious solutions to the problems presented set the stage for the teaching of analytical reasoning skills. Perhaps the most important lesson learned from case analysis is that there are oftentimes no absolute right or wrong answers to complex problems (Romm & Mahler, 1986).

**Active student participation.** In the case method of instruction, the student or trainee is ultimately responsible for his or her own learning. The student cannot sit passively in class and

take notes while the instructor provides carefully outlined facts and truths on the subject matter. Instead, students gradually arrive at their own individual set of "truths" through individual and group efforts to apply facts and theory in the solution of complex case situations. The majority of instructional time is spent in lively discussion of cases and participants are expected to participate actively. Through group discussion, participants learn how to listen to their peers, respect the opinions of others, and communicate their own opinions in a manner that gains respect from other group members (Kreps & Lederman, 1985; Scully, 1984).

The role of the case method instructor differs markedly from that of the traditional instructor (Christensen & Hanson, 1987; Scully, 1984; Smith, 1987). The role of the instructor has been variously described as that of facilitator, moderator, coach, motivator, catalyst, resource, and director. It is the responsibility of the instructor to create an atmosphere of suspended judgement (i.e., no absolute right or wrong answers), encourage independent problem-solving by participants, and keep the discussion going without becoming involved in the actual problem-solving. The instructor also serves as a resource for trainees. They should be able to provide the trainee with factual information and theory in the particular area of study. Better yet, they should be able to point trainees in the right direction to find answers for themselves.

## *Competencies Addressed by Case Stories*

Three areas of competency will be addressed by project-developed case studies and related case study activities: (a) working with families, (b) interdisciplinary and interagency coordination, and (c) child-level interventions. These areas are generally agreed upon as important for all early interventionists and seem particularly well-suited to training through the case method of instruction. A brief description of the competencies related to each of these content areas is provided next.

**Working with families.** A knowledge of family systems and skills for working effectively with families are considered by many to be essential skills for all professionals involved in early intervention. This includes the appropriate identification of family goals and aspirations, facilitating the active participation of families in intervention planning and service provision for their children, assisting the family in securing needed services, and working with the child within the context of the family.

Given the highly individualized nature of family reactions to their children's handicapping conditions as well as wide variations in family patterns of strengths, needs, resources, and values, it is unlikely that universally accepted or appropriate procedures for family assessment, IFSP development, case management, and the like will ever be developed. Nor is it necessarily desirable that it ever should be. What is needed in preparation for working with families is (a) a basic theoretical understanding of family systems, (b) an awareness of the impact of the child's disabilities on the family, and (c) general guidelines or principles for service provision (e.g., family involvement, parent-professional partnerships, family empowerment, family support). Even more, the professional needs to know how to apply this knowledge on a case-by-case basis.

**Interdisciplinary and interagency coordination.** It is widely recognized that quality services of the future will require integration and coordination of services across multiple agencies and across members of diverse professional disciplines both within and across agencies. In order to accomplish this, professionals will need to learn how to communicate with, teach, and learn from other professionals and be able to participate effectively on interdisciplinary teams (Bailey, 1989; McCollum & Thorpe, 1988).

Awareness of the skills, perspectives, and roles of professionals from other disciplines might be achieved through tradiitional lecture methods. So might the function and regulations of various types of agencies. One problem, however, is that the skills and knowledge of professionals within a given discipline may vary considerably. Likewise, the roles expected of members of a single discipline may change from one type of service setting to another or from one team to another. A similar problem exists with regard to the roles and functions of community agencies. Each community has a unique constellation of agencies providing services to handicapped children and their families, resulting in different expectations and functions of agencies across communities. These differences in agency functions are further accentuated when moving from one state to another.

The real key to integrated services, however, seems to be the ability to communicate with other professionals and engage in joint problem-solving. These skills are difficult to teach using traditional methods of training.

**Child-level interventions.** Bailey (1989) points out that, unlike other specialty areas within disciplines, the area of early intervention is defined by age and not by a specific disability or group of selected disabilities. The large majority of programs serving infants and preschoolers are noncategorical. Bailey further advises us that early intervention services are provided in a variety of settings (e.g., specialized developmental evaluation centers, neonatal intensive care units, family day care homes, mainstreamed and segregated classroom programs, families' homes, and inpatient and outpatient hospital settings). These two factors complicate the task of applying specific skills and techniques to very young children with handicaps. Professionals must be able to adapt their discipline-specific intervention methods to meet the needs of children with varying types and degrees of disability and taking into consideration the unique characteristics (e.g., resources and constraints) of the setting where each child is served.

## *Advantages of the Case Method of Instruction*

The advantages of using the case method of instruction as an alternative or supplement to traditional training in the content areas outlined above are as follows:

- The case method provides an experiential knowledge base for trainees (preservice).
- Application skills are specifically taught in the case method of instruction. Thus, the abrupt jump from theory to practice is muted.

- Trainees are immediately aware of the practical applicability of theoretical knowledge and factual information as it is presented within the context of case study.
- Trainees have the opportunity to practice and develop their communication skills with colleagues (i.e., classmates) and receive feedback within a relatively safe environment.
- Students are taught problem-solving skills. They are equipped with the skills (and, hopefully, the confidence) to analyze difficult and complex situations they may face and rationally decide upon a course of action.
- The case method allows for the combined training of several content areas at one time (families, child-level interventions, and interdisciplinary and interagency coordination). In actual practice, these issues rarely occur in isolation.
- The effects of the case method on professional performance may transcend changes in theory and knowledge in the field, in that trainees are specifically taught how to problem-solve and apply new knowledge to real-life situations.

## PRODUCT DEVELOPMENT AND EVALUATION ACTIVITIES

### *Development of case stories and related training materials*

The primary purpose of the CMI Project was to develop and make available case stories and related training activities for use in early intervention personnel preparation. To this end, the majority of staff time over the 3 years of the project was devoted to the collection of case materials and the writing of case stories for use by preservice and inservice instructors in early intervention.

Case material was collected through visits to a variety of types of settings where early intervention takes place (families' homes, regular child-care centers, specialized/segregated child care facilities, hospital clinics, developmental evaluation centers, etc.). Interviews with service providers, administrators, and families of children with disabilities provided much of the needed material to write case stories that addressed the many and varied issues and situations early interventionists face in their daily work with children and families. Case material was gathered from both within North Carolina as well as from families and professionals living and working in other states (e.g., Louisiana, Virginia, Maryland, New Mexico, and Washington state). Thus, the situations described in the project's case stories were developed to reflect the reality of early intervention service provision in the United States. A total of 23 completed case stories were developed by the project and disseminated to instructors nationwide. A brief description of each of the project's stories is provided in a later section of this report (see *Project Impact* section of this report).

**Table 1. Titles of CMI Project's Case Stories**

| | |
|---|---|
| Recipe for Rachel | Proceed with Caution |
| At the Close of the Day | First Knowledge |
| cc: Parker Ellis | Silent Partner |
| Grandpa's Lap | A School for Sara |
| A Family Feud | Money Matters |
| Daria's Silence | A Change of Plans |
| Sunset View | Leaving Wisconsin |
| Beyond Duty | Happy Birthday! |
| Passing Time | Handle with Care |
| Mother of Two | What Color is Forever? |
| The Need to Know | La Maestra |
| Absent Mother | |

Instructional materials/activities were developed for and accompany each project-developed case story. Instructional materials/activities include discussion questions, written assignments, small group activities, team simulations, and role play. Some cases have multiple activities, with each activity designed to address a different competency needed by early interventionists. Instructional activities are disseminated along with the stories.

### *Field-Test Reviewers*

As we turned our attention to field-testing of project-developed materials, we realized that our originally proposed method for doing this was not very sophisticated and would probably not produce the volume of feedback we wanted. Consequently, a revised and more intricate plan for field-testing was developed, implemented, and produced satisfying results. The following sections describe our revised procedures.

**Recruitment procedures.** A list of 121 potential field-test reviewers (preservice and inservice instructors across the nation) was compiled from a number of sources. Some had had previous contact with the Principal Investigator and had indicted an interest in the case method of instruction. Others had attended workshops or conference presentations conducted by the Principal Investigator. And still others were selected for recruitment from the NEC*TAS directory of personnel preparation and outreach projects. Over the course of the project, additional instructors were recruited to serve as field-test reviewers. These additional recruits came about as the result of our dissemination efforts (journal articles, workshops, conference presentation) or as a result of their response to a recruitment announcement we placed in the *Zero to Three* "Task Talk" newsletter.

**Field-test procedures.** A packet of information was developed and mailed to all potential field-test reviewers. This packet contained a) the CMI Project brochure, b) a letter of introduction, c) a demographic form, d) a brief description of case stries currently available from

the project, e) a selection form for indicating their choice of case story, and f) a stamped return envelope for mailing the demographic and selection form back to the CMI Project.

Upon receipt of an instructor's demographic form and selection form, a second packet was mailed. This packet contained a) a brief letter of explanation for conducting the review, b) the case story they had selected along with instructional activities, c) a review form for rating the case story along a number of dimensions, d) a new selection form for choosing the next case story they wanted to receive, and e) a stamped return envelope. The review form included in this mailing and all subsequent mailings to field-test reviewers is provided in Appendix A..

Each time an instructor returned a review form, a new case story was mailed to them along with a review form and an opportunity to choose another case story of their own selection. Thus, field-test reviewers received one case story (and related instructional activities) at a time, and continued to receive case stories so long as they returned review forms.

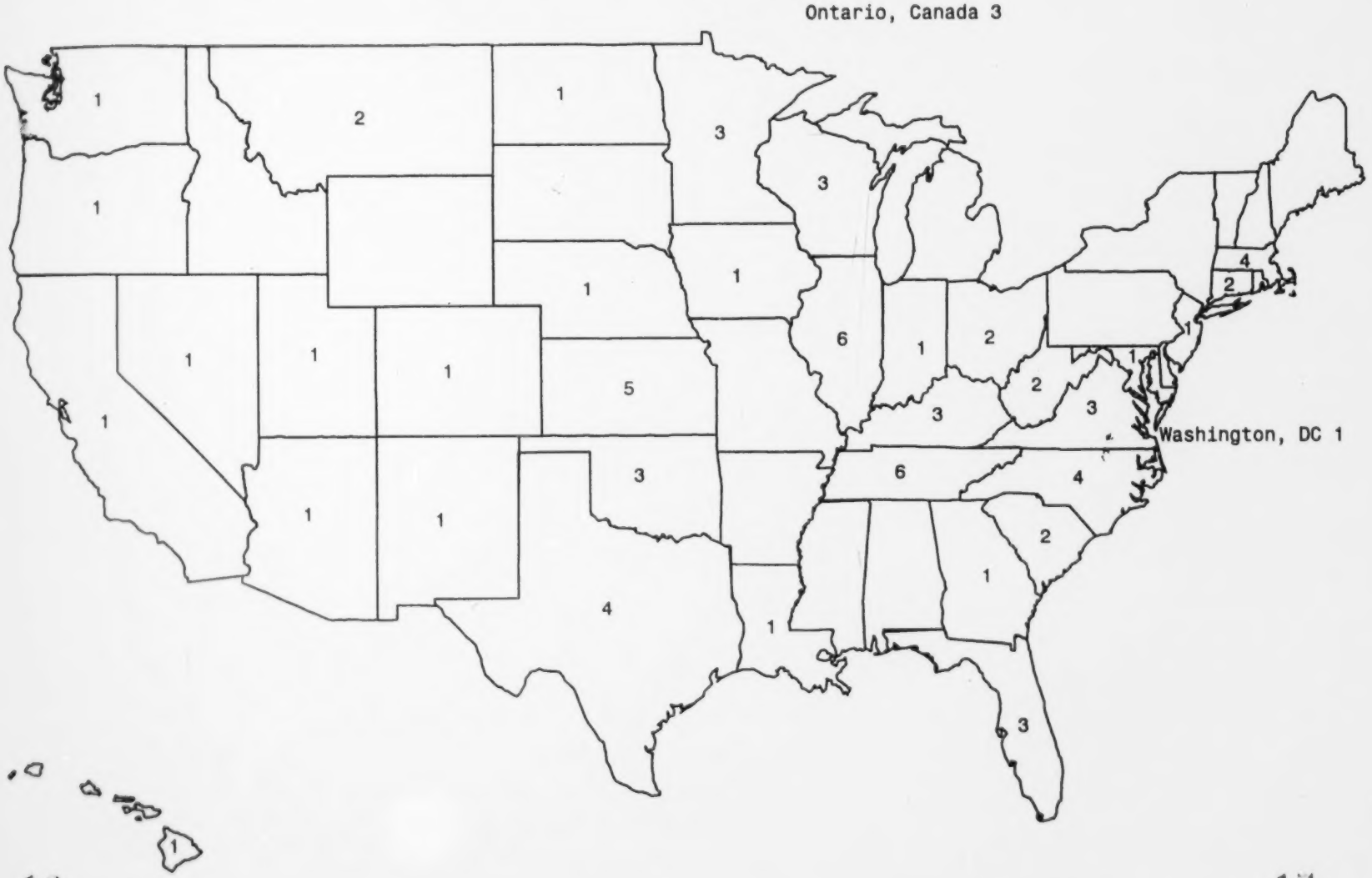
**Characteristics of field-test reviewers.** Field-test reviewers represented 33 states, the District of Columbia, Puerto Rico, and Canada. A map showing the actual distribution of field-test reviewers is provided in Figure 1. The sex, race/ethnicity, and highest degree earned, and professional discipline background of reviewers for whom demographic information was obtained (N=80) is shown in Table 2.

**Table 2. Characteristics of field-test reviewers by sex, race, and highest degree earned and professional discipline background (N=80).**

| Sex | N | Race | N | Highest Degree Earned | N |
|---|---|---|---|---|---|
| Female | 73 | White | 71 | Doctorate | 44 |
| Male | 7 | African American | 1 | Masters | 23 |
| | | Hispanic | 2 | Bachelors | 3 |
| | | Other/Unknown | 6 | Unknown | 10 |

| Discipline | Number of Reviewers |
|---|---|
| Special Education | 15 |
| Early Childhood Spec. Educ | 15 |
| Psychology | 13 |
| Speech/Language Pathology | 10 |
| Social Work | 6 |
| Regular Education | 4 |
| Nursing | 4 |
| Occupational Therapy | 3 |
| Physical Therapy | 2 |
| Child Development | 2 |
| Early Intervention | 2 |
| Unknown | 4 |

Figure 1. National Scope of Reviewers



Of the 80 field-test reviewers for whom demographic information was available, **62 reported that they were involved in preservice training** and **68 reported that they were involved in inservice training** activities. A total of **55 out of the 80 reviewers (69%) reported that they engaged in both** preservice and inservice training activities. The mean number of years that instructors had been conducting **preservice training was 9.16 years**, and the mean number of years for instructors' experience in providing **inservice training was 7.11 years**. A more detailed description of the types of preservice and inservice training activities reported by field-test reviewers is provided below in Tables 3 and 4: .

**Table 3. Preservice training activities reported by field-test reviewers**
**(Number of reviewers=62)**

| **Level of Students taught** | **Number of Reviewers** |
|---|---|
| Undergraduate students | 44 |
| Graduate students | 54 |
| Both undergraduate and graduate students | 37 |
| **Program or Departments in Which Students Are Enrolled** | **Number of Reviewers** |
| Special Education | 41 |
| Early Childhood | 35 |
| Speech/Language | 25 |
| Psychology | 20 |
| Social Work | 18 |
| Nursing | 15 |
| Regular Education | 14 |
| Physical Therapy | 8 |
| Occupational Therapy | 8 |
| Medicine | 8 |
| Nutrition | 5 |
| Audiology | 5 |
| Other | 11 |
| Teach courses that include early intervention content? | Yes = 59 No = 3 |
| Teach courses that focus exclusively on early intervention | Yes = 43 No = 19 |

**Table 4. Inservice training activities reported by field-test reviewers.**
**(Number of reviewers=68)**

| Type of inservice training activities | Number of Reviewers |
|---|---|
| Conduct state, regional, or local workshops | 59 |
| Presentations at state/national conferences | 56 |
| Provide on-site consultation | 45 |
| Supervision/management of program staff | 11 |
| **Participants in Inservice Training** | **Number of Reviewers** |
| Professionals | 68 |
| Parents | 54 |
| Paraprofessionals | 49 |
| Program Administrators | 45 |
| **Discipline Background of Inservice Training Audiences** | **Number of Reviewers** |
| Early Childhood Special Education | 57 |
| Speech/Language Pathology | 48 |
| Special Education | 47 |
| Physical Therapy | 43 |
| Occupational Therapy | 43 |
| Social Work | 41 |
| Psychology | 34 |
| Nursing | 32 |
| Regular Education | 31 |
| Audiology | 23 |
| Nutrition | 21 |
| Medicine | 19 |

**CMI Survey procedures.** In addition to providing feedback regarding the perceived quality and usefulness of individual case stories and related instructional materials, field-test reviewers who reviewed a minimum of 3 case stories were asked to complete the CMI Survey. This survey asked reviewers questions about (a) their perception of the overall usefulness and quality of project-developed case stories—including how they compared to other materials they have used, how project materials might be improved (e.g., types of supplemental materials and other topics that should be addressed), (b) their overall interest in using the case method of instruction, their confidence in using the method, and what would help them improve their skills in using case method instructional strategies, and (c) the extent to which they have actually used project-developed case stories in their own training activities. A copy of the CMI Survey form is provided in Appendix A.

## *Efficacy Study: Determining the Impact of CMI in Preservice Training*

An investigation was conducted in coordination with Dr. Patricia Snyder at Louisiana State University Medical Center (LSUMC) in New Orleans. The purpose of the investigation was to evaluate the effectiveness of using CMI as the primary method of instruction in teaching an interdisciplinary preservice course on family-centered approaches to early intervention. More specifically, the study was conducted to answer the following questions:

- Do statistically significant or noteworthy changes occur in attitudes about family-centered early intervention when CMI is used with students enrolled in interdisciplinary family courses?
- Do statistically significant or noteworthy changes occur in application skills related to family-centered practices when CMI is used with students enrolled in interdisciplinary family courses?
- What qualitative changes occur in student attitudes about family-centered early intervention and student application skills when CMI is used with students enrolled in interdisciplinary family courses?
- Do students acquire knowledge of family-centered practices as defined by course objectives when CMI is used with students enrolled in interdisciplinary family courses?
- How satisfied are students with interdisciplinary family courses when CMI is used as the primary method of instruction?

**Description of Student Participants.** The sample consisted of 67 graduate students enrolled in four interdisciplinary family courses. Students ranged in age from 20 years to 50+ years. Analysis of ethnic distribution revealed that 60% (n=40) of the students were Euro-

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American, 23% (n=19) African-American, 7% (n=5) Native American, 2% (n=2) Asian-American, and 1% (n=1) African Indian. Students in the sample represented the disciplines of early childhood special education,(n=23), nursing (n=13), special education (severe-profound emphasis) (n=24), occupational therapy (n=3), physical therapy (n=2), and social work (n=2). Table 5 provides a breakdown of the study sample by age, discipline, and race/ethnicity across the four course sections.

**Table 5. Numbers of students by discipline, ethnic status, and age groups across four course sections.**

| Discipline | Fall 1992 N=12 | Spring 1993 N=18 | Fall 1993 N=13 | Spring 1994 N=24 | TOTAL N=67 |
|---|---|---|---|---|---|
| Nursing | 5 | | 8 | | 13 |
| Early Childhood Special Education | 4 | 10 | 1 | 8 | 23 |
| Special Education | | 8 | | 16 | 24 |
| Social Work | 1 | | 1 | | 2 |
| Occupational Therapy | 2 | | 1 | | 3 |
| Physical Therapy | | | 2 | | 2 |
| **Age Group** | | | | | |
| 20-25 years | 3 | 5 | 0 | 8 | 16 |
| 26-30 years | 2 | 3 | 3 | 5 | 13 |
| 31-35 years | 4 | 1 | 4 | 2 | 11 |
| 36-40 years | 3 | 4 | 3 | 5 | 15 |
| 41-45 years | 2 | 2 | 2 | 2 | 8 |
| 46-50 years | | 2 | 1 | 1 | 4 |
| Over 50 years | | 1 | | 1 | 2 |
| **Ethnic Status** | | | | | |
| Euro American | 10 | 10 | 7 | 13 | 40 |
| African American | 2 | 5 | 5 | 7 | 19 |
| Native American | | 2 | | 3 | 5 |
| Asian American | | | 1 | 1 | 2 |
| African Indian | | 1 | | | 1 |

**Instrumentation.** Four instruments were used to operationalize major study constructs. These measures included (a) Issues in Early Intervention (Humphry & Geissinger, 1990), (b) The Alexander Family Case Study (McWilliam, 1989), (c) an instructor-generated knowledge examination, and (d) course and instructor satisfaction forms. A brief description of each of these instruments is provided below.

**Issues in Early Intervention (Humphry & Geissinger, 1990)** is a 24-item questionnaire that we used to measure attitudes about family-centered intervention practices. Response categories for items range from 1=strongly agree to 5=strongly disagree . Examples of items from the scale include "*The most appropriate time to include families in setting priorities for treatment is in the post assessment period when*

*we know something about the child"* and *"Family involvement in goal setting is not realistic during the first few months after the family learns about their child's handicap."*

**The Alexander Case Study (McWilliam, 1991)** was used to measure family-centered application skills. This measure consists of a short case study followed by 42 application questions. The case study introduces the reader to the Alexander family and raises three issues that arise during this family's interactions with professionals. The issues relate to (a) family disagreement with physical therapy recommendations, (b) family apprehension about using augmentative communication devices, and (c) maternal stress about her child's need for constant attention. McWilliam developed 14 application questions for each of these issues. The application questions suggest alternative courses of action that professionals might take to address the issues. Some courses of action are consistent with family-centered principles, others are not. For each application question, respondents indicate whether they would follow a particular course of action using a 5-point Likert-type scale from 1=definitely would not to 5=definitely would. Examples of application items include "*Continue to impress upon Diane [mother] the importance of an augmentative communication system for Bea [child],*" "*Suggest to Diane that she consider counseling for herself,*" "*Offer to try to adapt Bea's stroller even though it would never provide the support that a travel chair or wheelchair would*", and "*Tell Diane that she owes it to herself to be more firm with Bea and less indulgent.*"

**Final Exam.** This was a knowledge test developed by the instructor and designed to assess students' understanding and recall of facts related to family-centered practices (e.g., theoretical principles, research findings).

**Course Evaluation Form.** Standard university-issued course evaluation forms were used to assess student satisfaction with the case method approach to teaching. These were chosen because the course evaluation forms were not seen by the instructor and, therefore, would allow a more anonymous (i.e., honest) appraisal of the course and the instructor. Because course evaluation forms were somewhat different between the 2 universities, items were selected that were comparable across the 2 universities. This yielded 7 questions about the course and 5 questions about the instructor. In addition, an overall rating of both the course and the instructor were included.

**Procedures.**

The family courses were taught in successive fall and spring semesters, from fall 1992 to spring 1994, at two urban universities in the South Central United States. Fall courses were taught at one university and spring courses at the other university.

Pretest measures were administered to students during the first week of class each semester. These measures included (a) demographic forms, (b) Issues in Early Intervention—attitude measure, and (c) The Alexander Family Case Evaluation---application measure. Posttest measures, identical to pretests, were administered during the last week of class. Students

completed the final exam (knowledge) and the course evaluation form (satisfaction measure) at posttest only. Finally, a open-ended attitude and application question was asked at the end of the final exam.

The same instructor taught all four courses. The instructor used the same course syllabus each semester in an effort to keep course content constant. The method of instruction was predominately CMI. To document how many hours she devoted to the case method of instruction each semester, the instructor recorded the length of time CMI was used at each class meeting.

## LOGISTICAL DIFFICULTIES AND DEPARTURES FROM ORIGINAL PLANS

For the most part, the CMI Project followed the goals, objectives, and planned activities as stated in the original proposal. A few changes, however, were made over the course of the project and these are discussed here. First, some videotapes for use with case stories were originally planned, however, the originally proposed budget was significantly reduced in negotiations and these were not possible to produce. This change was discussed and agreed upon by the Project Officer and it was not felt as though elimination of this product significantly altered the outcome of the project.

Second, it was originally proposed that approximately 40 case stories would be developed by the end of the granting period. The 23 case stories that were actually produced falls short of this number. In part, this reduction was the result of cuts in the originally proposed budget, but it was also realized rather quickly how difficult it was to find or train staff members to produce the quality of writing that was necessary for the production of case stories. In addition, feedback from reviewers indicated that more detailed, complex, and well-written case stories were what was wanted by them. It was decided not to sacrifice quality for quantity, and the case stories that were produced took significantly more time to develop than originally planned. Based on reviewers' ratings of the case materials produced, the decision to emphasize quality appears to have produced the desired outcomes.

Third, as mentioned previously, the strategies employed to obtain feedback from field-test reviewers were different from those originally planned. Although the revised procedures were more time consuming and expensive, they definitely yielded a higher quantity and more valuable data than would ever have been obtained through the originally planned procedures. The ongoing feedback of field-test reviewers was invaluable in guiding the CMI Project's activities.

# EVALUATION FINDINGS

## *Results of Field-Test Reviews: Quality and Usefulness of Training Materials*

Field-test reviewer feedback is reported for 20 of the 23 stories and related training materials developed by the CMI Project. Reviewer data on the remaining 3 stories is not reported due to the fact that they were developed late in the project and there is insufficient data for reporting. A total of **448 review forms were completed by field-test reviewers** over the course of the project, with reviews representing feedback from instructors of varied educational backgrounds (i.e., 11 professional disciplines). The breakdown of number of case reviews by field-test reviewers of these 11 discipline backgrounds is graphically represented in Figure 2. As can be seen, the majority of reviews came from instructors with a background in special education and early childhood special education. This, however, was expected given the fact that the majority of reviewers represented education- or early childhood-related fields. The second most frequently represented discipline of instructors completing reviews was speech/language pathology.

The review form (see Appendix A) asked instructors to rate case stories along a number of dimensions. The following questions were asked using 5-point Likert rating scales (with 5 being the highest rating possible):

1. How would you rate the **overall quality of writing** in this case story?
2. How **interesting** did you find the case story?
3. How **realistic** were the situation and characters described in this case story?
4. How would you rate the **level of difficulty of the situation** encountered by the professional(s) in this case story?
5. How **important are the topics or issues** addressed by this case story in the preparation of early interventionists?
6. How **helpful** would the **study questions/instructional activities** be to instructors who use this case story as a training activity?
7. How useful would this case story be in **your own training** of students or professionals?

Field-test reviewers' mean ratings of case stories along each of these dimensions are shown in Table 6. An overall quality score was also generated by combining across the first 4 questions (i.e., quality of writing, interest, realism, and importance of topics addressed). As can be seen by the average ratings shown in Table 6, field-test reviewers gave high ratings to project-developed case stories and training materials and most reviewers said that the case stories would be useful in their own preservice and inservice training activities.

Figure 2. Number of Reviews by Discipline (N=448)

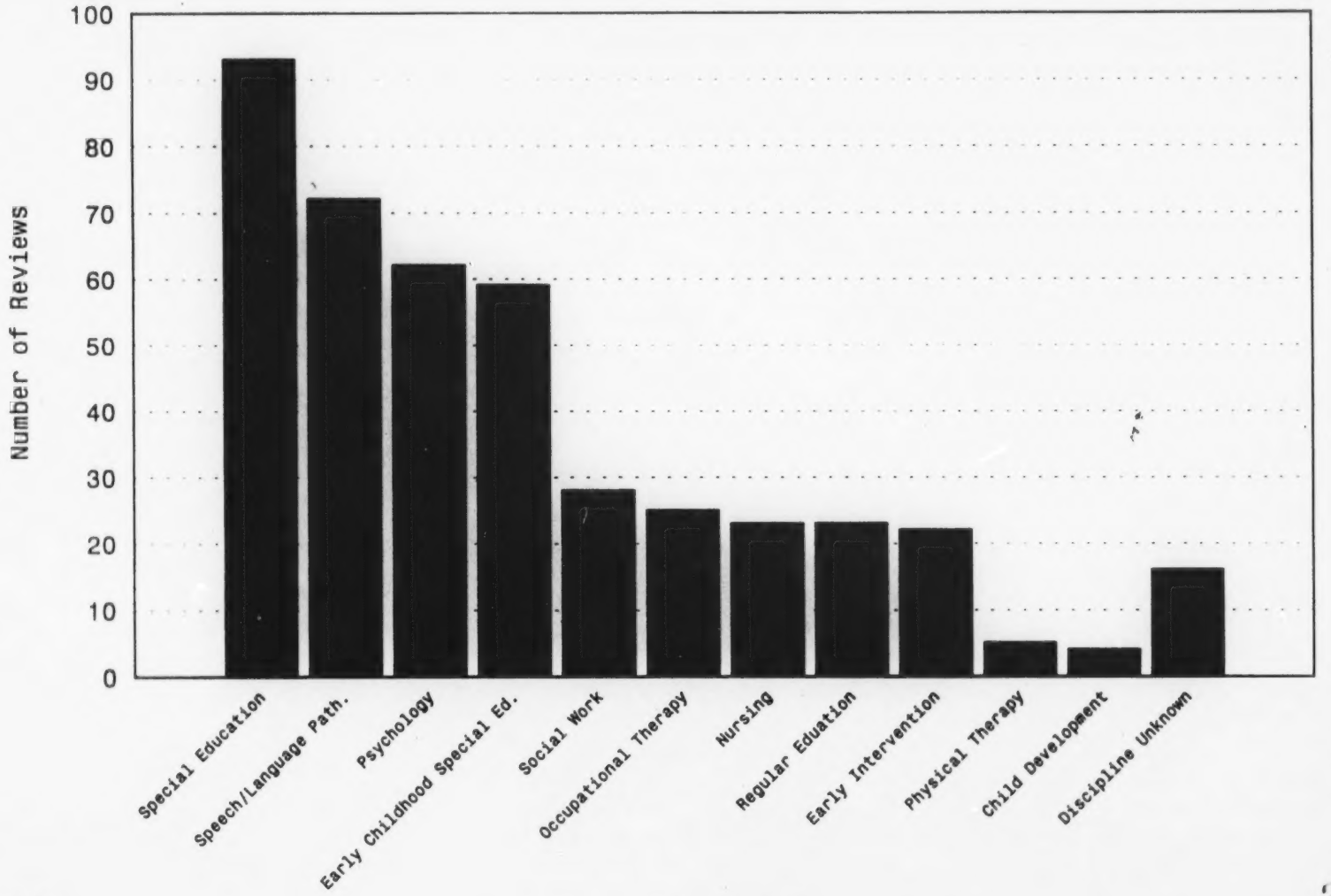

Table 6. **Mean Rating of Stories by Field Test Reviewer**

| | N | Quality of Writing | Interest Level | Realistic Situation | Importance of Topic | Overall Quality | Difficulty of Situation | Study Questions | Usefulness to Training | Number of Disciplines |
|---|---|---|---|---|---|---|---|---|---|---|
| A Change of Plans | 23 | 4.26 | 4.00 | 4.22 | 4.30 | 16.60 | 3.43 | 3.91 | 3.81 | 6.74 |
| A School for Sara | 26 | 4.32 | 4.23 | 4.61 | 4.53 | 17.53 | 3.44 | N/A | 3.96 | 6.85 |
| Absent Mother | 26 | 3.96 | 4.15 | 4.34 | 4.65 | 17.11 | 4.11 | 4.52 | 4.00 | 6.50 |
| At the Close of the Day | 10 | 4.80 | 4.60 | 4.70 | 4.70 | 18.80 | 4.10 | 4.70 | 4.70 | 8.70 |
| Beyond Duty | 21 | 3.85 | 3.80 | 4.04 | 4.00 | 15.71 | 3.19 | 4.00 | 3.71 | 5.66 |
| cc: Parker Ellis | 10 | 4.80 | 4.90 | 4.60 | 4.90 | 19.20 | 4.90 | 4.70 | 4.20 | 7.00 |
| Daria's Silence | 24 | 4.62 | 4.58 | 4.66 | 4.79 | 18.66 | 4.75 | 4.66 | 4.29 | 7.58 |
| Family Feud | 16 | 4.31 | 4.43 | 4.43 | 4.37 | 17.56 | 3.81 | 4.18 | 3.93 | 6.25 |
| First Knowledge | 37 | 4.27 | 4.13 | 4.72 | 4.56 | 17.07 | 3.21 | 4.38 | 4.21 | 9.11 |
| Grandpa's Lap | 12 | 4.25 | 4.25 | 4.67 | 4.83 | 18.00 | 4.16 | 4.66 | 4.00 | 6.75 |
| Happy Birthday! | 24 | 4.29 | 4.41 | 4.66 | 4.70 | 18.08 | 3.79 | 4.37 | 4.29 | 6.25 |
| Leaving Wisconsin | 31 | 4.51 | 4.58 | 4.64 | 4.87 | 18.61 | 4.00 | 4.58 | 4.53 | 6.94 |
| Money Matters | 21 | 4.42 | 4.61 | 4.80 | 4.95 | 18.80 | 3.61 | 4.90 | 4.60 | 6.52 |
| Mother of Two | 21 | 4.52 | 4.57 | 4.60 | 4.80 | 18.25 | 4.61 | 4.57 | 4.30 | 7.67 |
| Passing Time | 23 | 4.13 | 4.43 | 4.69 | 4.78 | 18.04 | 4.47 | 4.60 | 4.13 | 8.22 |
| Proceed with Caution | 37 | 4.27 | 4.16 | 4.64 | 4.62 | 17.59 | 3.81 | 4.32 | 4.19 | 6.38 |
| Recipe for Rachel | 17 | 4.29 | 4.23 | 4.35 | 4.29 | 17.17 | 3.58 | 4.52 | 3.68 | 7.58 |
| Silent Partner | 17 | 3.82 | 3.47 | 3.82 | 3.76 | 14.88 | 3.00 | 3.58 | 3.29 | 6.24 |
| Sunset View | 27 | 4.44 | 4.55 | 4.74 | 4.88 | 18.62 | 4.48 | 4.81 | 4.33 | 8.33 |
| The Need to Know | 25 | 4.64 | 4.84 | 4.56 | 4.80 | 18.84 | 4.48 | 4.68 | 4.12 | 8.48 |

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The *Field-Test Review Form* also asked reviewers to place a check beside the professional discipline(s) for which the case story would be appropriate to use in training. A total of 12 different disciplines were listed (social work, physical therapy, occupational therapy, regular education. special education—early intervention specialty, psychology, speech-language, nursing, medicine, audiology, and nutrition). The last column on the right of Table 5 shows the average number of disciplines checked per story by reviewers. As can be seen, on average, reviewers thought that each case story was appropriate for use in the training of 5-8 different professional disciplines. Thus, the goal of the CMI Project to develop training materials appropriate for the various disciplines involved in early intervention appears to have been accomplished.

Finally, the *Field-Test Review Form* asked reviewers to write down any additional comments or suggestions they might have about the case story or related instructional materials Although this was an optional item on the form, we received a great many comments and useful suggestions. This information provided us with insight into what aspects of the case stories and training materials they liked and what we could include in future materials we developed. Examples of the types of comments we received for 20 case stories is found in Appendix B.

## *Results of CMI Survey*

A total of 44 *CMI Surveys* were completed and returned by reviewers to whom they were mailed. Reviewers' responses on the survey are presented in sections that follow.

**Part 1—Overall quality and usefulness of CMI case stories.** Of the 44 reviewers who responded, 31 said that they had used case studies before receiving project-developed materials. When asked what type of case studies they had used previously, the majority indicated that they had used short vignettes. Only about one-third of respondents said that they had used detailed case studies of unsolved situations (i.e., cases similar to those developed by the project). When asked to indicate (rating scale 1-5) how useful the CMI case stories were compared to other case stories they had used in training, reviewers indicated that the CMI case stories were more useful.

| Degree of Usefulness | Number of Reviewers |
|---|---|
| 1—Much less useful | 0 |
| 2 | 0 |
| 3—About as useful | 3 |
| 4 | 11 |
| 5—Much more useful | 23 |

**Part 2—Skill development for using case method of instruction.** Part 2 of the *CMI Survey* was designed to find out how confident instructors felt about their skills in using the case method of instruction and their perceptions of what would be helpful in enhancing their skills. The questions that were asked and the responses of field-test reviewers (N=44) are provided below.

1. How did you learn about the case method (check all that apply)?

| | |
|---|---|
| **Read about it in journals/books** | **30** |
| **Observed others using the method** | **15** |
| **Participated as an audience member** | **18** |
| **Attended a workshop/presentation** | **31** |
| **Other** | **9** |

2. How confident are you in your ability to use the case method effectively?

| **Degree of Confidence** | **Number of Reviewers** |
|---|---|
| 1 = Not at all confident | 0 |
| 2 | 1 |
| 3 =Somewhat confident | 8 |
| 4 | 29 |
| 5 = Very confident | 6 |

**Mean rating = 3.90**

3. How interested are you in learning to use case method strategies more effectively?

| **Degree of Interest** | **Number of Reviewers** |
|---|---|
| 1 = Not at all interested | 0 |
| 2 | 1 |
| 3 =Somewhat interested | 2 |
| 4 | 15 |
| 5 = Very confident | 24 |

**Mean rating = 4.47**

4. How helpful would each of the following strategies be for instructors who want to develop or improve their skills in using the case method?

| STRATEGY | NUMBER OF REVIEWERS | | | | | Mean Score |
|---|---|---|---|---|---|---|
| | Not at all Helpful (1) | (2) | Somewhat Helpful (3) | (4) | Very Helpful (5) | |
| Observing a skilled instructor conduct method | 0 | 1 | 3 | 5 | 35 | 4.68 |
| Reading about method in books/journals | 0 | 4 | 22 | 13 | 5 | 3.43 |
| Attending lecture/presentation about the method | 0 | 4 | 12 | 13 | 15 | 3.88 |
| Being a participant in a training event where case method is used | 0 | 2 | 3 | 5 | 34 | 4.61 |
| Practicing the method on your own | 3 | 6 | 17 | 13 | 5 | 3.25 |
| Having a skilled instructor observe and provide feedback | 0 | 2 | 4 | 11 | 27 | 4.43 |
| Informal discussions with other instructors who are attempting to use method | 0 | 0 | 4 | 14 | 26 | 4.50 |

As can be seen by the data displayed above, the field-test reviewers indicate that the most helpful strategies for learning or improving skills in using the case method of instruction involved

observing (mean rating = 4.68) or participating in a training where a skilled instructor is using the method (mean rating = 4.61). Both of these strategies involve modeling of case method techniques by a skilled instructor. The least helpful strategies, according to survey respondents would be practicing the method on your own without assistance (mean rating = 3.25), reading about the method in books or journals (mean rating = 3.43), and attending a lecture or presentation about the case method of instruction (mean rating = 3.43). It was somewhat surprising that reviewers rated "informal discussions with other instructors..." as the third most helpful strategy (mean rating = 4.50).

**Part 3—Use of project-developed case stories and related training materials.** The questions included in Part 3 of the survey and reviewers' responses are provided below.

1. Have you used any of the CMI case stories in your own preservice or inservice training?

   **Yes = 34 No = 10**

2. If yes, how effective were stories in accomplishing your instructional objectives?

| Degree of Effectiveness | Number of Reviewers (N=30) |
|---|---|
| 1 = Not at all effective | 1 |
| 2 | 0 |
| 3 =Somewhat effective | 1 |
| 4 | 14 |
| 5 = Very effective | 14 |

**Mean rating = 4.30**

3. How positive were the responses of students or trainees to case story use?

| How Positive | Number of Reviewers (N=31) |
|---|---|
| 1 = Not at all positive | 1 |
| 2 | 0 |
| 3 =Somewhat positive | 14 |
| 4 | 0 |
| 5 = Very positive | 16 |

**Mean rating = 4.39**

4. How likely are you to use case stories developed by the CMI Project in conducting preservice or inservice training over the next 6 months?

| How Likely | Number of Reviewers (N=41) |
|---|---|
| 1 = Not at all likely | 1 |
| 2 | 1 |
| 3 =Somewhat likely | 6 |
| 4 | 9 |
| 5 = Very likely | 24 |

**Mean rating = 4.29**

## *Results of Preservice Efficacy Study*

A one-group, pretest-posttest design was used to determine whether there were significant differences between pre=test and post-test measures of attitude (*Issues in Early Intervention*) and application skills (*The Alexander Family Case Study*). The mean pre-test and post-test scores on both of these measures by class section are shown in Figures 3 and 4. As can be seen, changes in both attitude and application skills occurred for all class sections in the hoped for direction. The four class sections were combined to conduct statistical analyses of change scores. These results are shown in Table 7. The analyses showed that statistically significant and noteworthy changes occurred in (a) student attitudes about family-centered early intervention (*p <.001) and (b) student application skills related to family-centered practices (*p < .001).

**Table 7. Results of pre-post comparisons of student attitude and application skills .**

**Issues in Early Intervention (Attitude)**

| | Mean Score | SD | t |
|---|---|---|---|
| Pre-test | 46.8 | 10.1 | |
| Post-test | 33.5 | 8.4 | 8.4* |

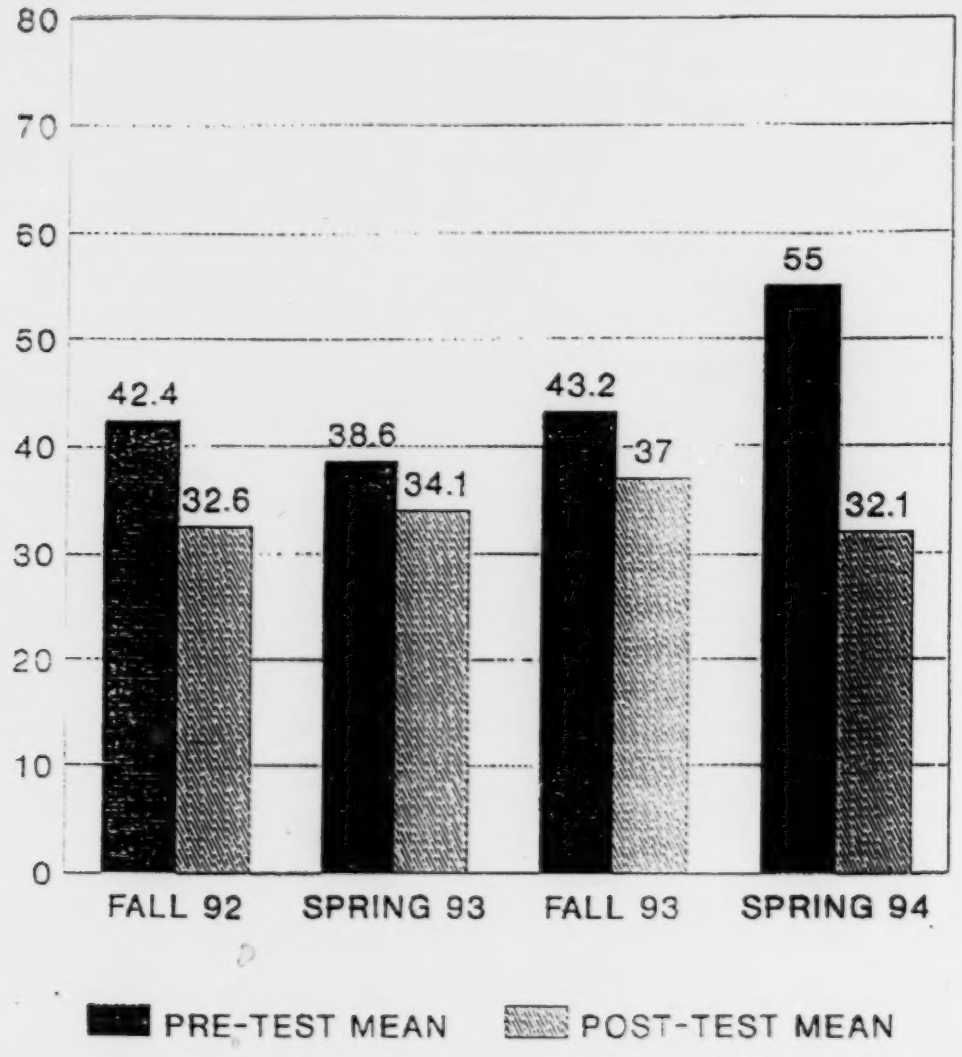
Note. Lower scores indicate more family-centered. Range of possible scores is 16-80.
*p < .001

**The Alexander Family Case Study (Application skills)**

| | Mean Score | SD | t |
|---|---|---|---|
| Pre-test | 124.5 | 9.8 | |
| Post-test | 143.0 | 16.0 | 10.29* |

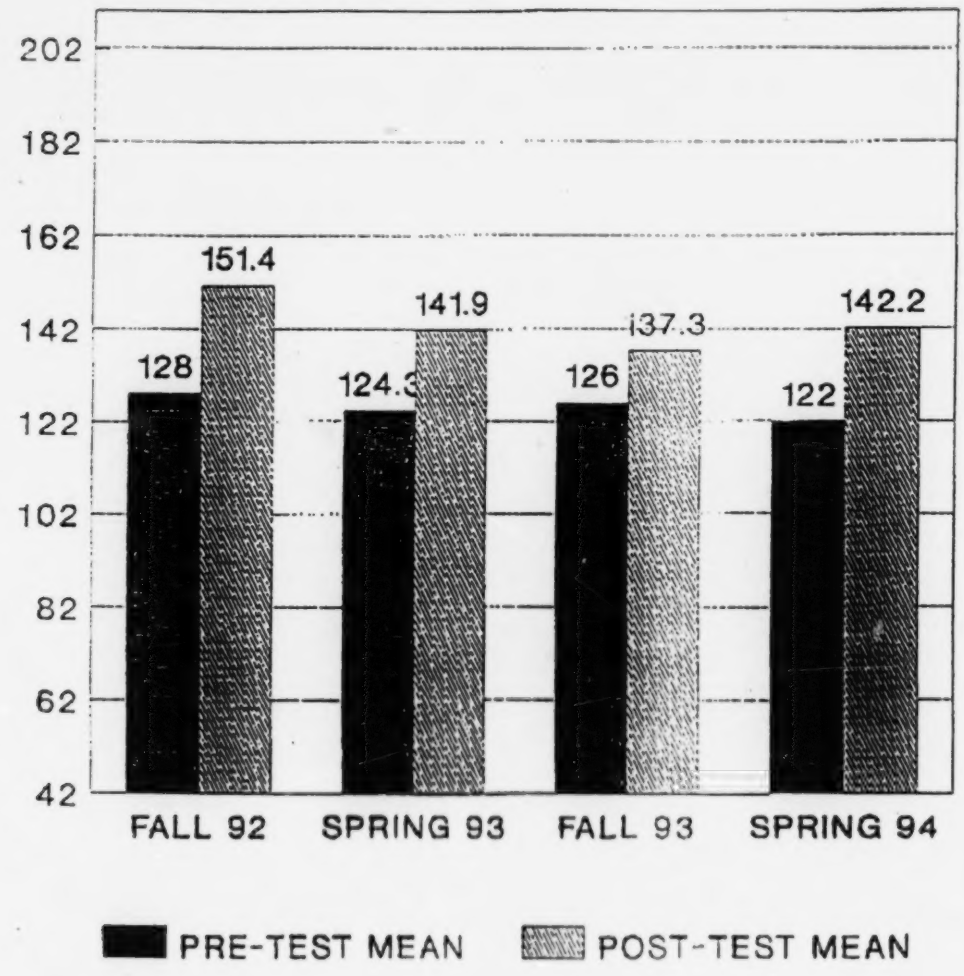
Note. Higher scores indicate more family-centered. Range of possible scores is 42-210.
*p < .001

# ATTITUDE CHANGE BY SECTION
# ISSUES IN EARLY INTERVENTION




LOWER SCORE = MORE FAMILY-CENTERED
RANGE OF VALUES = 16 TO 80

# APPLICATION CHANGE BY SECTION ALEXANDER FAMILY




HIGHER SCORE • MORE FAMILY-CENTERED
RANGE OF VALUES • 42 - 210

Measures of student knowledge (instructor-developed final exam) and student satisfaction with the course and intructor (standard university course evaluation forms) were administered at post-test only. All students passed the final exam with the mean score approximating 142 out of a possible 150 points. Student responses on the anonymous university course evaluation form resulted in a mean score of 4.67-4.88 out of a possible 5 points across the 4 class sections. The mean overall rating of the instructor was 4.75-4.96 out of a possible 5 points. Mean scores for the 7 ratings of specific aspects of the course and the 5 ratings of specific characteristics/behaviors of the instructor are provided in Table 8.

**Table 8. Mean Scores for Students' Ratings on Course Evaluation Forms**

| Item Content | Fall '92 N | Fall '92 Mean Score | Spring '93 N | Spring '93 Mean Score | Fall '93 N | Fall '93 Mean Score | Spring '94 N | Spring '94 Mean Score |
|---|---|---|---|---|---|---|---|---|
| **Overall course rating** | **(12)** | **4.67** | **(16)** | **4.81** | **(13)** | **4.69** | **(25)** | **4.88** |
| Relationship between course objectives and what was taught | (12) | 4.92 | (16) | 4.69 | (13) | 5.00 | (25) | 4.92 |
| Projects or assignments | (11) | 4.90 | (16) | 4.88 | (13) | 4.92 | (25) | 4.92 |
| Clearly stated course requirements | (12) | 4.83 | (16) | 4.88 | (13) | 4.77 | (25) | 5.00 |
| Tests/exams related to course objectives | (12) | 4.83 | (16) | 4.62 | (13) | 4.69 | (25) | 4.91 |
| Textbook | (10) | 4.80 | | | (12) | 4.67 | | |
| Understanding of concepts/principles | (12) | | (16) | 4.56 | (13) | 4.85 | (25) | 4.88 |
| Usefulness or practical application | (12) | 4.83 | (16) | 4.69 | (10) | 4.40 | (25) | 4.76 |
| **Overall instructor rating** | **(12)** | **4.92** | **(16)** | **4.75** | **(13)** | **4.92** | **(25)** | **4.96** |
| Presentations are planned/prepared | (12) | 4.92 | (16) | 4.75 | (13) | 5.00 | (25) | 5.00 |
| Accessibility out of class | (12) | 4.83 | (16) | 4.44 | (13) | 4.46 | (25) | 4.88 |
| Instructor's knowledge | (12) | 4.92 | (16) | 4.88 | (13) | 4.92 | (25) | 5.00 |
| Answering questions and ability to explain | (12) | 5.00 | (16) | 4.81 | (13) | 4.92 | (25) | 4.96 |
| Sensitivity to students' needs | (12) | 5.00 | (16) | 4.69 | (13) | 5.00 | (25) | 5.00 |

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# PROJECT IMPACT

The most important outcome of the CMI Project was that it produced case stories and related training materials appropriate for use in early intervention personnel preparation. Without the availability of high quality case materials, the case method of instruction would not be a viable strategy for preservice and inservice training. In addition to providing these products, the dissemination activities of the CMI Project insured that instructors across the U.S. were informed about the use and advantages of case method instructional strategies, and the availability of project-developed products. Finally, a number of training sessions by project staff guided instructors in the use of case method techniques. The following sections provide information on the availability of products and the project's dissemination and training efforts.

## *Products Available*

**Case stories and related instructional materials.** Provided in Table 9 below is a list of the case stories developed by the CMI Project and a brief description of the issues addressed by each story. These stories and related instructional materials (e.g., role plays, team simulations, small group activities, written assignments) are compiled in a volume entitled ***Making Decisions: Case Stories in Early*** which is currently available through Frank Porter Graham Child Development Center (Publications and Dissemination Office, FPG Child Development Center, CB# 8185, Uniiversity of North Carolina, Chapel Hill, NC 27599-8185). A complete copy of this manuscript has been sent to the U.S. Department of Education along with this final report). In addition to these newly-developed stories, stories developed by a previous federally-sponsored project (Carolina Institute for Research in Infant Personnel Preparation) were published in 1993 by P.J. McWilliam and Donald B. Bailey. This case collection is entitled ***Working Together with Children and Families: Case Studies in Early Intervention*** and is available through Paul H. Brookes Publishing Company, P.O. Box 10624, Baltimore, MD 21285-0624.

**Table 9. Titles and Descriptions of Case Stories Developed by the CMI Project**

**Recipe for Rachel (P.J. McWilliam & Kathryn Matthews)**

Gwen Roland, a teacher in an inclusive preschool setting, is confused about how to handle the situation with three-year-old Rachel Stevens. Rachel has Prader-Willi syndrome, the most prominent characteristic of which is life-threatening obesity in early adulthood. Rachel's mother, Sandy Stevens, is determined to control her daughter's diet before any real problems begin. Although Gwen agrees with Sandy about the need for diet control, she has found it to be far more difficult than she first imagined it would be. Cookies, cakes, and other high-calorie foods are constantly around the preschool classroom. Gwen's attempts to control the availability of such foods have met with resistance from the parents of other children in the classroom and her assistant, Luanne, has sabotaged Gwen's efforts to control what and how much Rachel eats at school. Lately Gwen has begun to wonder whether Sandy is being too strict with Rachel, and the child's recent display of temper tantrums related to food have made Gwen question Sandy's approach even more.

**Table 9 (cont'd)**

**At the Close of the Day (P.J. McWilliam & Kathryn Matthews)**

This story is a continuation of *Recipe for Rachel* in which Sandy Stevens's perspective on the situation at the preschool is presented. Sandy's knowledge about Prader-Willi syndrome is also presented, and the reader is afforded a better understanding of this mother's thoughts, fears, and hopes for her young daughter, Rachel. In addition to Sandy's thoughts, the story offers a glimpse into the home life of the Stevens family, the impact of Prader-Willi syndrome on all members of the family, and how they have decided to handle the challenges they face. *At the Close of the Day* is intended to be used in conjunction with *Recipe for Rachel* as a means of providing students and inservice audiences an opportunity to practice communication skills in working with families. Specific instructional activities are included for using the story to a) identify family concerns, priorities, and resources, and b) work in partnership with families to develop family-centered IFSPs and IEPs. Activities involve role-play, small-group work, team simulation, and writing intervention plans.

**cc: Parker Ellis (P.J. McWilliam)**

Dana Tolliver had worked hard to insure a smooth transition to kindergarten for Lucas Coleman. Over the past three months, she had discussed Lucas's needs frequently with Yolanda Powell, an employee of the Clarksburg City School system who handles all transitions of children entering public school. Lucas Coleman has Down syndrome and has been served by the various early intervention programs at Lochridge Children's Center since he was six weeks old. Dana works at Lochridge Center and has been Lucas's service coordinator for the past two years—ever since he left Lochridge's toddler classroom to attend a regular child care center in the community. Although there have been a few problems with Lucas's inclusion in regular child care, overall he has done quite well, and his parents want him to be in a regular kindergarten next year. Everything seemed to be going according to plans until two days before Lucas's placement committee meeting when Yolanda Powell called to tell Dana that the committee was unlikely to approve of an inclusive placement. Yolanda's predictions turned out to be true. Even worse, the chairperson of the school placement committee treated Lucas's parents insensitively during the meeting. Angered at such behavior, Dana spoke up on behalf of the parents and reminded the parents of their rights to appeal the decision. Dana's behavior, however, was not without consequence. The chairperson quickly inflicted her revenge, and Dana found herself being offered up as a political sacrifice by the administrators at Lochridge Children's Center.

**Grandpa's Lap (P.J. McWilliam)**

Pam Bowman usually spoke with Demitrius's grandmother who walked him to preschool most mornings. The grandmother had always seemed pleased with what Pam was doing with Demitrius in the classroom. How could Pam have known how unhappy Demitrius's grandfather was about the services his grandson was getting? Demitrius had been absent from Pam's classroom for a prolonged period, so Pam made an unscheduled visit to the grandparents' home to find out what was wrong. When she arrived, Demitrius's grandmother was out on an errand and only the grandfather, Mr. Carey, was at home. Mr. Carey was unfriendly towards Pam and, during a most awkward conversation, he told her that he did not want Demitrius to be seen by the physical therapist any more. Apparently the grandfather had witnessed a therapy session at the school and didn't like the fact that the physical therapist had made Demitrius cry. It also sounded as though the grandfather might not want Demitrius to attend Pam's classroom. Who is responsible for what has happened, and who should repair the damage? Pam is very concerned that Demitrius will be taken out of all services and, given the severity of his cerebral palsy and his cognitive delays, Demitrius clearly needs intervention.

**BEST COPY AVAILABLE**

**Table 9 (cont'd)**

**A Family Feud (Miki Kersgard)**

Hannah Osborne arrives at the Catesville Community Day Care Center and is told that three-year-old Conrad Brown no longer attends the center. His mother, Shonda Brown, took him out a week ago and enrolled him in another center across town. With Shonda's permission, Hannah makes a visit to the new child care center in Donsbridge. The place is a plush and expensive, but Hannah is alarmed by the new teacher's attitude toward children with disabilities. Can Conrad ever be fully included under such conditions? On a subsequent home visit to Shonda, Hannah becomes aware of the reason Conrad was moved to the center in Donsbridge. Shonda is furious at her ex-mother-in-law, Louise, and she says that she no longer wants Louise to be involved in Conrad's life. Hannah wants to support Shonda's decisions, but is concerned about how the recent changes will affect Shonda and Conrad. Hannah is also sympathetic to Louise's position and feels that Shonda may be judging her too harshly. Should Hannah get involved in a family feud?

**Daria's Silence (P.J. McWilliam)**

Gayle Webster has been visiting the Edwards' home in the projects for seven months now, ever since Daria Edwards left the group home for female juvenile offenders. Daria and her infant son, Andre, are both HIV positive. It hasn't been easy working with Daria because she always seems angry and Gayle's attempts to develop a trusting relationship with her have all seemed to fail miserably. There's just no breaking through Daria's wall of silence. Gayle spends the day accompanying Daria and Andre to the regional pediatric HIV clinic at St. Mark's hospital. The news is not good, and Gayle is caught off guard when staff members at the clinic take her to the side and divulge their own concerns about Daria and Andre.

**Sunset View (Wanda Hedrick & P.J. McWilliam)**

Alice is becoming increasingly suspicious that Miguel, a young child she visits weekly, may have autism. She has been intending to discuss her suspicions with Miguel's mother, Carolyn, for several weeks now, but hasn't been able to do it. Carolyn's life seems difficult enough as it is. Alice can't imagine how Carolyn can continue living with her husband, Eduardo. He constantly orders Carolyn around and belittles her in front of Alice. When Alice arrives one day, Carolyn has a black eye—not the first sign that Eduardo physically abuses her.

**Beyond Duty (Miki Kersgard)**

Carrie Richards has been working with Nathan Hammond as part of an inclusion program for preschoolers at Smiling Faces Day Care. She has an appointment to discuss Nathan's upcoming needs with the director, Violet Webster. As Carrie arrives for the meeting, Violet is handling an emergency. One of Violet's former preschoolers is suspended from Kindergarten for behavioral problems and his grandmother is looking for a place to take him while she is at work. Although the student was not one of Carrie's children, she becomes drawn into the situation. This case story may be used as a sequel to *Proceed with Caution* or it may stand alone.

**Passing Time (Miki Kersgard)**

Arora Steele is only 17 years old and already a mother. Her son, Jamille, was born two months prematurely. Although his health has improved, Jamille is still small and there are concerns about his overall developmental progress. Arora lives with her mother, Mavis Steele, and her 6-year-old sister. Without Mavis's help, it is doubtful if Jamille would have done as well as he has. A professional who makes regular home visits is concerned that Arora's interest in her son has declined over the past few weeks. She is truly alarmed, however, when she arrives for a visit and finds that Arora isn't home, and has left her little sister in charge of Jamille.

**Table 9 (cont'd)**

**Mother of Two (Miki Kersgard)**

Harrison Street is renowned for its violence, drugs, and gangs. This is where 19-year-old Crystal Matthews lives with her two young children. Rhonda Spelling has developed a trusting relationship with this young mother and wants to do whatever she can to help Crystal succeed. Rhonda visits Crystal because her infant son, Corey, is at risk for developmental delays, but she is also concerned about Crystal's daughter who will be entering kindergarten soon and doesn't seem ready. Rhonda's overriding concern, however, is the safety of this family, and she begins the process of helping Crystal obtain better housing. In doing so, Rhonda makes a promise to Crystal—a promise not to tell who the father of Crystal's children is. Rhonda is shocked when she discovers that Crystal is a victim of incest.

**The Need to Know (P.J. McWilliam)**

Paula Goldman is a young, single mother who lives at home with her parents. Her son, Jeffrey was born prematurely and is hemiplegic due to complications during his stay in the neonatal intensive care unit. Sherra Nowell-Hill has been providing home-based services to the Goldmans since shortly after Jeffrey's homecoming. Jeffrey is now 17 months old and Paula is interested in finding a child care center for him to attend. Sherra makes a visit to discuss child care options, but is unprepared for the news that Paula delivers—Jeffrey is HIV-positive. Furthermore, Paula wants his condition to remain a secret.

**Absent Mother (Wanda Hedrick)**

Chauncey, now six months old, was exposed prenatally to illegal drugs. Immediately following Chauncey's birth, his mother, Angela, sought treatment for her addiction and succeeded in becoming drug-free. Lynne, an early interventionist, has been providing home-based services to the family for several months. Visits with Angela and Chauncey have gone quite well until recently. Over the past few weeks, Angela has not been home for Lynne's scheduled visits. On this particular day, Lynne arrives to find Chauncey and his two sisters at their great-grandmother's apartment a block or two down the street from Angela'ss. The great-grandmother tells Lynne that Angela is using drugs again. She shares her concerns about Angela's addiction and its effect on her ability to parent. She also talks to Lynne about what she can do to get her granddaughter off of drugs once and for all.

**Proceed with Caution (P.J. McWilliam)**

Three-year-old Nathan Hammond is a new referral to the Preschool Inclusion Program (PIP) and Carrie Richards has been assigned to the case. Early one morning, Carrie arrives at Smiling Faces Day Care where Nathan is enrolled. Carrie has never been at this preschool before and is in for a cultural awakening. Although the director, Violet Webster, is friendly to Carrie, the other care providers at Smiling Faces Day Care are less than welcoming. Carrie is also taken back by the rigid structure imposed on the children and the strictness of the caregivers. Above all, Carrie is concerned that Nathan is not being included as he ought to be, and she questions whether the staff is amenable to making changes.

**Silent Partner (Miki Kersgard)**

Roz Polikanski is perpetually late in picking up her daughter, Angela, from the preschool she attends for children with special needs. Samantha Price, the classroom teacher, is somewhat irritated by Roz's tardiness, but is more concerned about the overall quality of home life that Roz provides for 3-year-old Angela. Much of Samantha's concern, however, is based only on suspicion such as her questioning of the numerous "uncles" who arrive with Roz when she comes to pick up Angela at the end of the day. This day a new suspicion arises and one that Samantha finds difficult to ignore. Some money is missing from her desk and she strongly suspects that Roz has taken it.

**Table 9 (cont'd)**

**First Knowledge (P.J. McWilliam)**

(Team Simulations/Role-Play) Jack and Mae Donaldson live on a modest income in the small town where they both grew up. Their son, Billy, was born 2 1/2 months prematurely. Billy required resuscitation at birth, had a mild ventricular hemorrhage, and was diagnosed as having severe bronchopulmonary dysplasia. When Billy was 14 months old, his pediatrician referred the family to the county early intervention team for a formal evaluation. There are concerns about Billys motor development, his failure to gain weight, chronic respiratory infections, speech delays, and delays in overall cognitive development. The story focuses on the referral and assessment process conducted by the team with the Donaldson family. Summaries of the information gathered by individual members of an interdisciplinary team are provided. Descriptions of both the mother's and father's perspectives are also provided to allow for role-play. A variety of instructional activities are included.

**A School for Sara (P.J. McWilliam)**

(Role-Play) This is a story about a reasonably affluent, two-parent family with two young daughters. The father is employed by the university and the mother, Terry Nichols, enjoys her status as a stay-at-home mom. The youngest child, Sara, was born prematurely, but progressed nicely following her discharge from the neonatal intensive care unit. Only later was her moderate hearing impairment detected. Sara is now 2 1/2 years old. The family has purchased hearing aids for her and there is a preschool program for children with hearing impairments in their community with a well-qualified staff. For some reason, however, the family doesn't seem to acknowledge Sara's needs for amplification and special education. The professional in this situation doesn't understand why the mother, who used to be so cooperative, has become so unfriendly and resistant over the past few weeks.

**Money Matters (P.J. McWilliam)**

Blair Seagroves is four years old. Despite her severe cerebral palsy, and the fact that she has no speech, it is becoming increasingly obvious that she is a bright little girl. Much of her progress is owing to the dedicated effort of her mother, Judy Seagroves. Anne-Marie has been working with the family since they moved from Minnesota to Forest Hills. Over the past few months, Anne-Marie and Judy have been working together to develop an augmentative communication system for Blair. This story describes Anne-Marie's most recent visit to the Seagroves' home. During this visit, Judy informs Anne-Marie that family finances may no longer allow her to continue being a stay-at-home mom. Judy also raises concerns about her six-year-old son, Nick. These new concerns force Anne-Marie to revise her strategies for working with this family and challenge her knowledge of the resources that are available in the Forest Hills community.

**A Change of Plans (Miki Kersgard)**

Elvie Bishop is going to kindergarten in a few months. Linda Malcolm, ElvieÕs speech therapist, has worked together with ElvieÕs mother in planning the transition to their neighborhood elementary school in the Fall. As part of the plan, Elvie was scheduled to be seen by the child development clinic at the hospital. Linda knew that testing would be needed in order for Elvie to receive special education services in public school. The day after the testing was done ElvieÕs mother, Valerie Bishop, storms into the building looking for Linda Malcolm. Valerie is fuming about something she was told at the child development clinicÑsomething about a change in ElvieÕs school placement in the Fall.

**BEST COPY AVAILABLE**

**Table 9 (cont'd)**

**Leaving Wisconsin (P.J. McWilliam)**

Fresh out of graduate school, Liz moves to the Deep South to take her first job as a special education teacher in a classroom for preschoolers with developmental delays. After a few weeks on the job, however, Liz has become disenchanted. Her efforts to be family-centered and apply other recommended practices in early childhood special education have met with resistance from the occupational therapist and the speech and language pathologist at the school. Liz discusses her concerns with her supervisor, Helen Rohe, but Helen is only marginally supportive. Liz is left to decide for herself whether she will conform to the status quo or take action to achieve her ideals.

**Happy Birthday! (P.J. McWilliam)**

Sachi Daugherty, is confused about her grandson's transition from the infant and toddler program to the preschool program sponsored by the public schools. Allison currently provides home visits to the family and is the service coordinator, but her services will end shortly. She has been planning this transition with Sachi for several months, but a number of unexpected developments have occurred over the past few weeks. First, Allison has found out that Sachi's grandson, James, cannot continue to receive speech therapy at his inclusive preschool because the program is outside the boundaries of the school district. Second, James's aggressive behavior toward other children at the preschool is a growing concern for the preschool staff. Allison has less than two months to address these issues and finalize the transition plan. Beyond these immediate concerns, Allison also questions James's future and the support that Sachi Daugherty will have available to her in caring for her grandson.

**Writing case stories.** A short manuscipt providing guidelines for writing case studies was developed by the project and made available for dissemination. This manuscript is entitled "***Writing case stories: The art of storytelling***" and is available through the Principal Investigator (P.J. McWilliam, Ph.D., Frank Porter Graham Child Development Center, CB# 8185, University of North Carolina, Chapel Hill, NC 27599-8185).

## *Dissemination Activities*

In addition to announcing the availability of project-developed case stories and disseminating case materials through our national field-test reviewers, the project staff conducted numerous training events for instructors and published several articles on the case method of instruction. These are listed in the sections that follow.

**Presentations and Workshops.** The following conference presentations, workshops, and on-site consultations related to the case method of instruction were conducted over the course of the 3-year project:

McWilliam, P.J. (1993). "Using the case study method.", A two-day consultation to Child Development Resources sponsored by NEC*TAS. Williamsburg, Virginia, July 21 and 22.

McWilliam, P.J. (1993). "A likely story: Using the case method of instruction in training early intervention personnel." A one-day faculty development institute sponsored by the Early Intervention Personnel Development Committee of the Illinois Interagency Council and the Comprehensive System of Personnel Development, Champaign, Illinois, June 18.

McWilliam, P.J. & Snyder, P. (1993). "The case method of instruction." Faculty members for Southeastern Institute for Faculty Training, Flat Rock, NC, August 4-8.

McWIlliam, P.J. (1993). "The case method of instruction: A new approach to teaching family-centered practices." Invited speaker at a summer institute sponsored by the Midwestern Institute for Faculty Development. St. Paul, Minnesota, August 15, 1993.

McWilliam, P.J. (1993) "The case method of instruction: Preservice applications." Invited speaker for the North Carolina Division for Early Childhood Council for Exceptional Children Conference (NC-DEC), Greensboro, NC, October 6, 1993.

McWilliam, P.J. (1994) "The case method of instruction: Reality-based training in early intervention. Invited workshop for the EEPCD Combined Meetings and NEC*TAS Conference, Arlington, VA, January 24, 1994.

McWilliam, P.J. & Snyder, P. (1994). "The case method of instruction." Faculty members for Southeastern Institute for Faculty Training, Flat Rock, NC, May 21-25.

McWilliam, P.J. (1994). " Applying family-centered principles in real life through the case method." Invited 2-day workshop sponsored by the Los Ninos Project, Albuquerque, New Mexico, June 7 & 8.

McWilliam, P.J. (1994). "The case study method: Bridging the gap between theory and practice." Invited presentation. Forum for Educators and Trainers of Infant/Family Personnel. Sponsored by Zero to Three/National Center for Clinical Infant Programs. Washington, DC, July 28, 1994.

McWilliam, P.J. (1994). The case method of instruction: A useful approach for inservice training in early intervention. Invited 2 ½ day workshop for instructors sponsored by Baby Watch Early Intervention (Utah Department of Health—Part H Personnel Development), Salt Lake City, UT, August 3-5, 1994.

Snyder, P. & McWilliam, P.J. (1994). "Evaluating outcomes from the case method of instruction: Data-based support for use of the approach in early intervention personnel preparation." Poster presented at the International Early Childhood Conference on Children with Special Needs (CEC-DEC). October, 1994.

McWilliam, P.J. (1995). The case method of instruction." Two-day on-site consultation and technical assistance provided to Project ACTT and sponsored by NEC*TAS. Macomb, IL, November 2-3, 1994.

McWilliam, P.J. & Snyder, P. (1995). "The case method of instruction." Faculty members for Southeastern Institute for Faculty Training, Amelia Island, FL, January 7-11.

McWilliam, P.J. (1995). Teaching through the case method of instruction." Invited presentation at Collaborating for Children: Early Intervention. Sponsored by the Medical University of South Carolina College of Nursing, Department of Continuing Education. Charleston, SC, October 2nd, 1995.

McWilliam, P.J. & Snyder, P. (1996). "The case method of instruction." Faculty members for Southeastern Institute for Faculty Training, Flat Rock, NC, June 1-5.

**Publications.** In addition to several short articles in various newsletters (e.g., Zero to Three's "Task Talk", the following publications were achieved by project staff and supported , at least in part, by the CMI Project:

McWilliam, P.J. (1992). The case method of instruction: Teaching application and problem-solving skills to early interventionists. *Journal of Early Intervention, 16*(2), 360-373.

McWilliam, P.J. & Bailey, D.B. (1993). *Working Together with Children and Families: Case Studies in Early Intervention*, Baltimore, MD: Paul H. Brookes Publishing Company.

McWilliam, P.J. (1995). Teaching family-centered skills through the case method of instruction. *Zero to Three, 15*(3), 30-34.

Snyder P. & McWilliam, P.J. (manuscript submitted for publication). Evaluating the efficacy of case method instruction: Findings from preservice training in family-centered care.

## *Impact on the Field*

The 448 reviews of project-developed case stories and related training materials indicated that preservice and inservice instructors from numerous states and with diverse professional discipline backgrounds found the materials to be of extremely high quality and useful for a variety of audiences. Thus, the primary goal of the CMI Project—to produce case materials appropriate for use in training students and professionals in a variety of professional disciplines associated with early intervention—was accomplished. The fact that so many field-test reviewers continued to send in reviews in order to obtain additional case stories and related instructional materials , alone, is indicative of the fact that the materials were perceived as being useful. In addition to requests for project-developed materials, purchasing information available from Paul H. Brookes Publishing Company indicated that in the first 2 years that more than 2,000 copies of *Working Together with Children and Families: Case Studies in Early Intervention* by P.J. McWilliam and Don Bailey were sold. This sales data also showed a number of bulk orders, indicating its use as a textbook. Thus, the case method of instruction in early intervention—unspoken of in the literature prior to 1992—appears to have "caught on" as a viable alternative to more traditional methods of instruction over the 3 years that the CMI Project was in existence.

The heightened interest of the field in the case method of instruction was also revealed in numerous requests for training over the course of the CMI Project. It should be noted that the CMI Project did not, itself, have funds available for providing training to instructors. The Principal Investigator and Project Director (P.J. McWilliam) was an invited speaker for nearly all of the workshops and presentations listed above.

Finally, the results of the preservice efficacy study described above provides the first evidence that the case method of instruction is not just a "nifty" idea, but that it is also an effective instructional strategy for training in at least one area of competency in early intervention personnel preparation (i.e., family-centered practices). A second efficacy study was also conducted in the summer of 1995. This was a comparative study, looking at the differential effectiveness of traditional methods of teaching family-centered practices and use of the case method of instruction. Students enrolled in a week-long university summer course on working with families were randomly assigned to one of two sections. One section employed more traditional instructional strategies (lecture, videotapes, discussion, parent panel, nationally-recognized guest speakers), and the other section made predominant use of the case method (cases from the McWilliam & Bailey book as well as from the CMI Project). Although the data from this investigation are still being analyzed, preliminary analyses indicates that the case method was just as effective in producing changes in knowledge and attitudes as the more traditional method of training, and produced greater effects in terms of teaching application skills and measures of student satisfaction.

## FUTURE ACTIVITIES

Several future activities that build on the CMI Project are planned or underway. First, Paul H. Brookes has agreed to publish a second volume of case stories that includes those developed by the CMI Project—thus insuring continued dissemination and availability of these materials beyond the funding period of the project. Second, the Principal Investigator, P.J. McWilliam has been awarded a Model Inservice Training Project grant through OSEP that began October 1, 1996. This project will develop, implement, and evaluate an inservice training model for teaching family-centered practices that combines the case method of instruction training with a team-based model for change. This project will allow for the continued dissemination of case method training strategies and provide support for further investigation of the efficacy of case method training. Finally, in 1996 Frank Porter Graham Child Development Center was awarded 5-year funding to establish and operate a National Research Center for Early Childhood Learning and Development. One of the activities of the National Center will be the development and dissemination of case stories for training. P.J. McWilliam will be responsible for accomplishing this institute objective. Thus, the breadth of case materials available for training in early childhood will be expanded to include nondisabled populations.

# ASSURANCE STATEMENT

A copy of this full final report has been sent to the ERIC Clearinghouse on Handicapped and Gifted Children. In addition a copy of the title page and abstract have been sent to the following organizations:

NEC*TAS
National Clearinghouse for Professions in Special Education (CEC)
National Information Center for Children and Youth with Disabilities (NICHCY)
Technical Assistance for Parent Programs Project (TAPP)
National Diffusion Network
Child and Adolescent Service System Program (CASSP)
Northeast Regional Resource Center
Midsouth Regional Resource Center
South Atlantic Regional Resource Center
Great Lakes Area Regional Resource Center
Mountain Plains Regional Resource Center
Western Regional Resource Center
Federal Regional Resource Center

# APPENDIX A

**Field-Test Review Form**
**CMI Survey Form**

# THE CMI PROJECT

## Field-test Review Form

**Reviewer's Name:** _____
**Title of Case Story:** _____
**Date:** _____

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 1. How would you rate the overall **quality of writing** in this case story? | 1<br>Marginal<br>Quality | 2 | 3<br>Satisfactory<br>Quality | 4 | 5<br>Excellent<br>Quality |
| 2. How **interesting** did you find the story? | 1<br>Not at all<br>Interesting | 2 | 3<br>Moderately<br>Interesting | 4 | 5<br>Extremely<br>Interesting |
| 3. How **realistic** were the situation and characters described in this case story? | 1<br>Not at all<br>Realistic | 2 | 3<br>Moderately<br>Realistic | 4 | 5<br>Very<br>Realistic |
| 4. How would you rate the level of **difficulty of the situation**encountered by the professional(s) in this story? | 1<br>Not at all<br>Difficult | 2 | 3<br>Moderately<br>Difficult | 4 | 5<br>Extremely<br>Difficult |
| 5. How important are the **topics or issues addressed** by this case story in the preparation of early interventionists? | 1<br>Not at all<br>Important | 2 | 3<br>Moderately<br>Important | 4 | 5<br>Extremely<br>Important |
| 6. How helpful would the **study questions** be to instructors who use this case story as a training activity? | 1<br>Not at all<br>Helpful | 2 | 3<br>Moderately<br>Helpful | 4 | 5<br>Extremely<br>Helpful |

7. For which of the following **groups of trainees** would this case story be appropriate? (Please check all that apply).

- ❒ PRESERVICE AUDIENCES
  - ❒ Undergraduate students
  - ❒ Graduate students
    - ❒ Master's program
    - ❒ Ph.D. program
- ❒ INSERVICE AUDIENCES
  - ❒ Entry level
  - ❒ Moderately skilled
  - ❒ Advanced skilled

**(OVER)** ☛

8. For which of the following **professional disciplines** would this case story be an appropriate training activity? (Please check all that apply.)

- ❒ Social Work
- ❒ Physical Therapy
- ❒ Occupational Therapy
- ❒ Regular Education
- ❒ Special Education
- ❒ Special Education (Early Intervention Specialty)
- ❒ Psychology
- ❒ Speech and Language
- ❒ Nursing
- ❒ Medicine
- ❒ Audiology
- ❒ Nutrition

9. What specific **content areas** might this case study be best suited for teaching? (Examples: child assessment, cultural diversity, IFSP development, transitions, parent-professional communication)

_____

_____

_____

10. How useful would this case story be in **your own training** of students or professionals?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all Useful | | Moderately Useful | | Extremely Useful |

**Additional Comments or Suggestions** (Optional)

_____

_____

_____

_____

_____

_____

**REMEMBER**

**Please indicate the case story you have selected to review next and send it along with this review. We will mail your next story as soon as we receive this form.**

THANK YOU!

ID# ____

# The CMI Project

## A Survey of Field-test Instructors

**Please return to:**

P.J. McWilliam, Ph.D.
The CMI Project
Frank Porter Graham Child Development Center
CB# 8180
University of North Carolina
Chapel Hill, NC 27599-8180
(919) 929-0938 or (919) 966-2932

# THE CMI PROJECT

## A Survey of Field-test Instructors

**Part #1: CMI Project Case Stories**

1. Before receiving CMI Project case stories, did you use case studies in conducting preservice or inservice training?
❒ Yes ❒ No

2. If you answered "yes" to question 1, which of the following types of case studies did you use before? *(please check all that apply)*

❒ Short vignettes—examples of best practice
❒ Short vignettes—unsolved situations
❒ Detailed case studies—examples of best practice
❒ Detailed case studies—unsolved situations

3. How useful for instruction are the CMI Project's case stories compared to other case studies you have read or used?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Much less useful | Somewhat less useful | About as useful | Somewhat more useful | Much more useful |

4. How interested are you in continuing to receive case stories from the CMI Project?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all interested | Not very interested | Somewhat interested | Interested | Very interested |

5. What topics or issues would you like to see the CMI Project address in future case stories?

_____

_____

_____

_____

_____

_____

6. What types of supplemental materials or changes in format/style might make the CMI Project's case stories easier for instructors to use?

_____

_____

_____

_____

_____

_____

7. How interested are you in writing your own case stories for teaching?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all interested | Not very interested | Somewhat interested | Interested | Very interested |

8. How confident do you feel in your ability to develop andwrite your own case stories?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all confident | Not very confident | Somewhat confident | Confident | Very confident |

## Part #2: The Case Method of Instruction

1. How did you learn about the case method of instruction?
*(please check all that apply)*

- ❒ Read about the method in books or journals
- ❒ Observed others using the case method
- ❒ Participated as an audience member where the method was used by the instructor
- ❒ Attended presentation or workshop
  Where? _____
- ❒ Other _____

2. How confident do you feel in your ability to use the case method of instruction effectively?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all confident | Not very confident | Somewhat confident | Confident | Very confident |

3. What concerns, if any, do you have about using the case method as a training strategy?

_____

_____

_____

_____

_____

_____

4. How interested would you be in learning to use case method instructional strategies more effectively?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all interested | Not very interested | Somewhat interested | Interested | Very interested |

5. How helpful would each of the following strategies be for instructors who want to develop or improve their skills in using the case method?

| | Not helpful | | Somewhat helpful | | Very helpful |
|---|---|---|---|---|---|
| a. Observing a skilled instructor conduct a training event. | 1 | 2 | 3 | 4 | 5 |
| b. Reading books or journal articles about the method | 1 | 2 | 3 | 4 | 5 |
| c. Attending a lecture or presentation given by a skilled instructor | 1 | 2 | 3 | 4 | 5 |
| d. Being a participant in a training event in which the case method is employed | 1 | 2 | 3 | 4 | 5 |
| e. Practicing the method on your own without assistance | 1 | 2 | 3 | 4 | 5 |
| f. Having a skilled instructor observe you use the case method and provide feedback | 1 | 2 | 3 | 4 | 5 |
| g. Participating in informal discussions with other instructors who are attempting to use the method | 1 | 2 | 3 | 4 | 5 |

Other strategies (optional):

_____

_____

_____

_____

**Part #3: Case Story Use in Training**

Although we have not asked field-test instructors to use the case stories they have reviewed for the CMI Project, we are interested to know whether you have used these materials for training.

1. Have you used any of the CMI Project case stories in conducting preservice or inservice training? ❒ Yes ❒ No

2. For each case story you have used over the past 6 months place a check (✓) in the appropriate box indicating the type of audience it was used with (preservice or inservice). If possible, please also provide an estimate as to the number of students or trainees who participated in the training.

| Title | Type of Audience Preservice | Inservice | Approx. number of participants |
|---|---|---|---|
| First Knowledge | ❒ | ❒ | ____ |
| Money Matters | ❒ | ❒ | ____ |
| The Need to Know | ❒ | ❒ | ____ |
| Absent Mother | ❒ | ❒ | ____ |
| Leaving Wisconsin | ❒ | ❒ | ____ |
| Proceed with Caution | ❒ | ❒ | ____ |
| A Change of Plans | ❒ | ❒ | ____ |
| A School for Sara | ❒ | ❒ | ____ |
| Happy Birthday | ❒ | ❒ | ____ |
| Silent Partner | ❒ | ❒ | ____ |
| Daria's Silence | ❒ | ❒ | ____ |
| Sunset View | ❒ | ❒ | ____ |
| Beyond Duty | ❒ | ❒ | ____ |
| Passing Time | ❒ | ❒ | ____ |
| Mother of Two | ❒ | ❒ | ____ |
| Grandpa's Lap | ❒ | ❒ | ___ |
| A Family Feud | ❒ | ❒ | ___ |
| Recipe for Rachel | ❒ | ❒ | ___ |

3. If you have used the CMI Project's case stories, how effective do you think they were in accomplishing your instructional objectives?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all effective | Not very effective | Somewhat effective | Effective | Very effective |

4. If you have used the CMI Project's case stories, how positive were the responses of students or trainees to their use?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all positive | Not very positive | Somewhat positive | Positive | Very positive |

5. How likely are you to use case stories developed by the CMI Project in conducting preservice or inservice training over the next 6 months?

| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|
| Not at all likely | Not very likely | Somewhat likely | Likely | Very likely |

Additional Comments (Optional):

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# APPENDIX B

## Reviewers' Comments on Quality and Usefulness of Case Stories and Related Instructional Materials

## THE NEED TO KNOW

- I like the use of details (e.g., "a teal-jacketed maitre"...) because it makes the story more visual and alive! Relating to the questions regarding Sherra's handling of the situation: Perhaps a more pointed question inquiring about and examining Sherra's verbal feedback methods - Did she (1) advise & evaluate, (2) analyze & interpret, (3) reassure & support, (4) question & probe, and/or (5) paraphrase & understand? How did the verbal response influence the communication process between Sherra & Paula? Thanks to this project for raising the consciousness regarding complex issues in EI. Perhaps some other questions related to how this would look on the IFSP. This case could be a real bugaboo for providers especially with how form oriented many IFSP meetings are. The challenge we hear from providers is balancing responsiveness to real-life situations with the sometimes irreconcilable differences in a given state's IFSP process. The policies and regulations sometimes overtake the intent of the Part H legislation as states respond to the chase for Part H funds. For example, some states are looking at Medicaid money for service coordination. The policies regulating this money are sometimes quite inflexible and un-family friendly. Therefore, the IFSP form may be completed and look similar to the IEP or "old" IHP thereby forsaking the process. Many outcomes still remain in professional's language and priorities. I think it may be very helpful to folks to utilize a case study such as this one to explore what potential outcomes may be defined on the IFSP as well as the process used to discuss these outcomes. This would seem to be a logical next step. Thanks for asking for input from the field!

- I think that this case study was excellent but only moderately useful in our training. Many of the other stories provided general issues which a student or professional was likely to encounter repeatedly. Today, many of our students are still not comfortable with AIDS issues due to the rural Appalachian setting. This is undoubtedly increase in the next few years, but it does not present a real and common issues in their daily lives now.

- Very true to life! Well written, interesting!

- This case is lengthy but has been my favorite so far. The questions of HIV positive, integrated day care and confidentiality are "real life" issues pertinent to any discipline.

- This case study is a great prelude to discussions regarding HIV/AIDS and program and state policies.

- The issues are numerous and complex. Although case studies provide excellent opportunities for extending integration of philosophy to practice, the length and complex nature of this one would prohibit use by our project since most of our training is a one to two day format.

- This case is a great one! It is very realistic and brings up professional issues that occur with collaboration between health and education. The study questions seem like they evoke a lot of conversation.

- Excellent opportunity to explore an important issue on many levels.

- I'd grant permission to retype and change teacher to nurse or social worker. I used it with undergrad student in public health nursing who make home visits. It gave them an idea of the complexity of cases they could be dealing with and it provided a good discussion on parent-nurse interactions and HIV. However, grad student in peds had much better understanding of how to proceed.

- This case presents a very realistic situation and one that is wide open to a variety of solutions. Great for comparing different solutions and having students defend their answers. Very well written.

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**PASSING TIME**

- Good depiction of a situation that student will certainly encounter.

- This is a very compelling story - one ripe for much discussion about what to do in such a situation and reflecting upon one's own attitudes, feelings, & beliefs. Thanks for the opportunity to read and review.

- This was a very realistic and has happened in our program. Home visitors need to be aware of these issues and prepared to handle them. Questions were great and I appreciated how you referred the reader back to their own state's laws for neglect.

- Questions with this case study were very good and to the point.

- This case would best seem to be utilized in the arena of social services and medicine/nursing. It may be particular of benefit to early interventionists at a preservice and/or entry level as preventive (based on the questions). However, the content is more appropriate for a more educated "audience" re: family systems.

- This is a case of far reaching potential. Ethics, abuse, hot line are all issues that could evoke lengthy discussions (with no right or wrong answers!).

- **BEYOND DUTY**

- A quick read! Excellent discussion questions re: confidentiality and roles/responsibilities. Brings up lots of potential questions re: transitions, interagency collaboration/communication. I believe this particular case study would be very appropriate for use with undergraduate students due to its rather clear, concise nature and content

(confidentiality, roles of service coordinators/ consultants, working in and with public schools, transitions).

- This was a case with a wider spectrum than some of the others. The preschool specialist expanding into K-12 is very touchy, particularly with a child with special needs that she's worked with before.

- This case reveals several complex issues dealing with professional ethics and confidentiality and family. The study questions might also include looking at a problem solving approach to mapping out (1) identifying the issues as to Carrie's role, (2) clarifying and examining the underlying issues, and (3) possible courses of action, alternatives, etc.

- This case raises some questions in regard to common mistakes and misconceptions people have about behavior management and the importance of a good functional analysis to determine the cause of behavior.

- This study is shorter than most and therefore easily adapted for a class assignment.

- Providing a board outline/diagram would have been helpful to include in an Instructor's manual of some sort. I think that this is a terrific professional dilemma case that has the potential for many creative solutions as well as a stepping off point for great discussions with students.

- This case address a critical issue that we do not always "touch on" in training. It is well developed with Carrie on the sidelines until the end. Very well constructed.

**PROCEED WITH CAUTION**

- A realistic sample of the interface between special services and community programs. More of a glimpse into the childcare worker's perspective might help.

- I used this case study as a part of my final exam. The case was given out the week before to read, and notes were permitted to be brought to class to answer the questions. I found it to be an excellent way for students to use the information they had learned this term. Thank you! Some shorter studies could be useful for "in class" activities.

- It seems the primary purpose of this case study would be to focus on inclusion issues and consultation skills. Questions 2,7,8,9 directly or indirectly address this emphasis. It does seem that additional questions specific consultation would be beneficial.

- I really enjoyed reading "Proceed with Caution." This particular case study poses a lot of questions and challenges in my mind. I automatically thought of the "us and them" professional vs. paraprofessional paradigm. The content really lends itself to a discussion

about individual, as well as, professional values. It also leads one to thoughts on roles of consultants; professional collaboration; and ideas on how to work together and best support child care providers who are willing to "include" children with disabilities. We also need to think about/revisit respecting families' choices for their children with this case study.

- I did use this case study in a class I teach with special and regular education graduate students. The discussion afterward was terrific. The students did a lot of brainstorming and often had to be brought back to a family focus. Great experience! Thanks.

- The "Parting Thoughts" section raises some very important questions. If we are to be sensitive to the family's life style and values, we must "Proceed with Caution" when we, as professionals, have concerns regarding the choices families are making. This study raises two very significant issues: (1) How to build a relationship of mutual trust and respect with families/caregivers, and (2) How to nurture the development of DAP to provide settings that embrace recommended practices for young children.

- This is a very typical situation. It requires adult consultation skills which usually are "touched upon" in current preservice programs, but weren't discussed, when I was in school (way back then!). I think that these skills are especially important for individuals who have been in the field for a while. Another group who seem to need adult consultation skills are service coordinators who often have direct service backgrounds.

- I was immediately struck by the need for "cultural sensitivity" on the part of EI specialists. I also think that this story portrays that sense of "expertness" that professionals often have, especially is they don't agree with what they see. I look forward to using this case with my class.

- I thought this case study was excellent. As the field of early childhood special education speeds toward inclusion, professionals must learn to interface in community programs. This scenario will be extremely helpful in identifying barriers to inclusion and stimulating discussion regarding how to overcome them. Good job! I will use this in my training. Thanks!

**DARIA'S SILENCE**

- I particularly like this case study because it has the potential to cover a number of content areas.

- Extremely versatile case study as "Gayle" could be a social worker or nurse thus allowing both professional groups to use the case study. Very realistic and allows for many ways to use in class/lecture/discussion. This one would be very useful in teaching my profession (nursing) with students at BSN or MS level.

- This is one of the most involved cases I've reviewed. The study questions are excellent - posing quandaries on many points.

- While informative, I found some of the thoughts and conversations too detailed. The length was verging on too long. Very comprehensive questions.

- The perplexing difficulties in this situation, along with the lack of singular solutions, are certainly realistic. I can feel the discomfort of the interventionist as I read this story. Thank you for providing an opportunity (for both undergraduates and advanced students) for students to feel uncomfortable with a situation like this. This is the best story yet (along with Super Mom).

- In Oklahoma, we have chosen a service delivery model with an identified position of "resource coordinator." We specifically hire people to coordinate resources with families. This story will be excellent for training Resource Coordinators in our state.

- I found this story especially helpful - it's a situation we face frequently and I know I need help in being more effective and dealing with my own irritation that comes up. Perhaps a question about our own feelings and how we deal with them would be helpful.

- This is an excellent case - it deals with many issues professionals encounter. It also demonstrates how "we", as professionals, contribute to many problems. For the instructor, some guideline regarding appropriate intervention may prove helpful.

- **ABSENT MOTHER**

- Good content area - very relevant to practitioners today.

- This is an issue that many of us need to discuss. I do hear service providers frequently grappling with what to do and how to do it when faced with issues of drug addiction and it's impact on the family. So it's an important story.

- Nice chance to be able to utilize extended family in a case study.

- This is a very realistic and demanding issue. The story was well written and the study questions should facilitate discussion in a variety of areas.

- This was very realistic. I would suggest having a study question regarding personal safety, i.e., when Lynne saw the drug transaction. For example, "If Lynne felt that her personal safety was in question when she witnessed the drug transaction, what could/should she have done?" The study questions are very good - open ended and not leading. They facilitate excellent discussion with participants able to take different perspectives.

- This is not an unusual situation for early interventionists to find themselves in. It is a very difficult one for seasoned professionals to handle. I wouldn't recommend it for undergraduate students.

- This story could be beneficial to any training with supervisors or directors of programs because it raises critical issues re: providing services that may be perceived as useful by the parent sometimes and other times, something to be avoided or not desired due to other influences (e.g., resumption of drug use); what role the professional is to play in terms of referral to other agencies; confidentiality issues and more.

**FIRST KNOWLEDGE**

- I used this case over a 4 week period with 5 small group team of 7 students each. The role playing simulation that they engaged in was so realistic it was unbelievable. Comments I got about the discipline assessment reports were that they (students) wanted more thorough assessment information (e.g., there was no educational report from a child development specialist/ed.). Also, the idea of including a board diagram for instructions might have been a good idea in an "instructor's manual." This case was a terrific vehicle to organize and operationalize the assessment, IFSP and intervention planning process for students. The students said - thank God for the "Donaldson family."

- Group activities were excellent. This particular case scenario could form the basis of an entire unit of either study or inservice training (as such it might be too lengthy for some inservice training).

- I greatly appreciate these case studies. They are contributing a great deal to my course on the Introduction to Young Children with Special Needs - Birth - 8. Each term I have diversified groups of students. The case studies meet their needs on many levels.

- The story involves professionals from different disciplines. Very appropriate for my students because they are from 7 programs (e.g., nursing social work, school psychology).

- I used this case study with an interdisciplinary group of service providers as an informal training experience. The make up of the group was : 6 psychologists, 4 speech paths, 8 social workers/home visitors, 4 nurses, 3 parents. The exercise was well received, but the professionals felt there should be more information in the developmental reports.

- Overall, this case study would serve as an excellent training tool. However, I often found myself wanting more information particularly regarding Billy's motor development.

- This is an excellent case!! The suggested activities were exceptionally developed and organized. I plan to use this case in the next couple of weeks. This is very realistic! Few of

the other cases related to assessment and this case is a great example. Good role playing activity!

- We tried this out with MSN students, residents in peds and medical students. The medical students had the most difficulty with it. It was their first interdisciplinary experience and most knew nothing about an IFSP. Some of the MSN students were also challenged (especially critical care students). The residents were completing their rotation in the Child Development Center and were the most comfortable with the process. They enjoyed the exercise.

- Thank you for the opportunity to review this case study. I believe the group activities are excellent in their focus. You have selected extremely important issues and have provided useful criteria to guide the activities (e.g., pg . 33-34, how to identify outcomes, and pg. 35, considerations in writing an IFSP).

- The stated purpose of the activities within this case story was "to apply a family centered approach from the assessment to intervention stages of the Donaldson's program. However, the manner in which the information was collected - beginning with the Social Worker's home visit - did not reflect a family centered approaches as described in most of the current literature. Granted, this may have been the author's intent, but then the activities and questions need to have been written and designed more clearly in order to facilitate the student's learning of what constitutes a "family centered" approach during the assessment process.

- One way to use this case with group activities is to give out the referral information first and work on group activity #1. Then give out some assessment information and work on #2 activity. This would allow students to plan some alternative assessment strategies and assess pros and cons. Resident students could read the entire case and discuss how their involvement as the primary physician could add additional information to the assessment process. Many residents would not realize that they could be involved beyond making a referral.

- The group activities are extremely functional for graduate students - meaningful learning to be generalized into real-life situations. For this case, as designed, it requires students to "role reverse" in the real sense as the case will be used in a single discipline graduate program. I am anxious to receive the next case!

## LEAVING WISCONSIN

- Great story for new professionals or a professionals newly trained with a family centered philosophy. Our students loved it! We utilized experienced professionals and teamed them up with new professionals to focus group discussions. Lots of wonderful strategies were

developed for walking into a new situation and fitting new ideas into traditionally operating programs.

- This story really reflects on what newly graduated students may encounter, but it goes further than that. It really is about change and the reality of how quickly change does and does not happen. Furthermore, it's a good discussion on how can we keep from getting discouraged when change doesn't happen as quickly as we want.

- Issues related to implementing shifts in the "real world" are extremely valuable. It is important to portray the therapists as individuals who are operating in the way that they have been trained. They have not been trained to work collaboratively or within a family centered model. Neither are administrators.
- A good case study for students finishing course work and beginning teaching and special education positions. This case study was realistic and described a situation similar to most beginning teachers. I'm looking forward to trying it with inservice students. Thanks.

- This case study was presented to a group of 10 early intervention resource consultants. They broke up into two groups to review the case study (it had been distributed with the questions ahead of time). When the two groups came together we compared responses. The questions were extremely helpful. The feedback from the group about the case study exercise was that it was extremely beneficial, realistic, and provided some ideas for their own work

- I liked this case study a lot and found it quite applicable to both preservice and inservice training.

- I think this case study would be extremely useful for preservice audiences and entry level service providers. It can help individuals realize the importance of matching their own teaching philosophy with that of prospective employers and provide information regarding the implementation of program change.

- This is a great problem solving situation and is extremely realistic.

- Good story - thanks for the information on "routine-based" approach.

- This will be used next semester in a course for all our special education majors - one on consultation and collaboration.

- This is a great case study! I feel it gets right at the heart of many issues and helps to develop change agent strategies. It would also be easily modified to change roles - i.e., teacher not receptive, but related service providers wanting to integrate into classroom! Thanks!

- The case study was presented to a group of 10 early intervention resource consultants. They broke up into 2 groups to review the case study (it had been distributed with the questions ahead of time). When the 2 groups came together, we compared responses. The questions

were extremely helpful. The feedback from the group about the case study exercise was that it was extremely beneficial and provided some practical ideas for them in their work. The issues in the case study transcend discipline.

- Add a question about how could Liz's training program prepare her for this type of situation? This is a great example of reality shock students face when moving fro their prep programs into the real world.

- Very true to life - wouldn't even need to have had a regional shift. This mind set change can occur with little geographic change!

- I waited to evaluate the story until I used it, which I did yesterday. The story is very rich and students hand many ideas. They enjoyed thinking about the situation and many said, after we completed it, that the discussion led them to a different way to approach the situation than they might have initially. The details about the characters revealed in the story was excellent. Also, the number of characters was reasonable and we could remember their names, roles and characteristics. Good job!

## A CHANGE OF PLANS

- Such a case story happens more often than we like to admit!

- I think this is a great example of what can happen when transitions are not planned.

- I enjoyed this case story very much. Wonderful for use when looking at family-guided philosophy and communication.

- This story has many elements that could be discussed relative to what is recommended practice. Two specific thoughts to be considered for discussion involve (1) parent-professional relationships - How would it be classified/described? How does this encourage/discourage capacity building of Valarie? What supports are needed to enable families? What models can you identify to help with this? (2) RE: question #3. Perhaps the question could be more open - "what could Linda have done?" This would allow for many descriptions from enabling to attempting to control. Discussions could then revolve around the different ideas that surface.

- The mother's manipulation of the staff and system would be interesting to discuss and problem solve strategies to manage "the family" in this case. Also, issues focused on the service manager's responsibilities in this case, regardless of specific discipline, would be useful.

- The issues raised in the case study are very important. However, because they were quite straight forward, the ERIC team was able to 'easily' identify the issues and suggest alternative strategies. The case study created good discussion but was not felt to be challenging enough.

**MOTHER OF TWO**

- I used it with M.S. students doing their first field work.
- I thought the study questions were excellent and helpful. The actual story seemed less well written than the first three I've read - a little less believable somehow, but overall, a useful one.
- Good story.
- I think the questions raise issues: e.g., is an obvious white, middle-class service provider imposing her values on this mother by having her make lists, folding clothes, etc. Also issues of disclosure (very good) - we need more.
- This case study will be very useful to me in teaching nursing students at the BSN level regarding confidentiality guidelines for how to discuss sensitive issues.
- This case poses a most interesting confidentiality issue - what to do from an ethical point of view. I think it's an excellent case for students to discuss with the study questions.
- Story and questions are well developed. During discussions re: the story, I think it would be extremely beneficial to involve social workers and others who are familiar with the legal issues in order to get input from the various perspectives.
- This story is appropriate for any professional serving as a service coordinator or who had been entrusted with the information regarding sexual abuse.
- The case is well written and challenging. It lends itself to high levels of problem solving re: communication and trust.
- The study questions are especially good, bringing out many aspects of home visiting and not sensationalizing the abuse.
- This case was very realistic and provided lots of thought provoking themes. A follow-up to this case would be great!
- Living in an area where problems similar to this case are very prevalent, I find it extremely relevant.

**MONEY MATTERS**

- Will use this in teaching a community nursing course this fall - an excellent mechanism to get students involved - all types of students. I really think this one will be useful to many practitioners.

- This is a great case!! I'm looking forward to using it! A great and practical way to identify community resources.

- Very realistic and a FREQUENT issue for interventionists. I like the balance and the way, in a short period of time, a number of family concerns were raised.

- This story was of particular interest to me as an SLP (at the beginning) and then even more interesting as an early interventionist as the case developed. The group project, which was included, was a great idea.

- Definitely will be using this one.

- This is a good case study in helping students identify community resources as well as what type of team support (e.g., SLP, medicine, PT, OT) this service coordinator is receiving.

- I like the idea of applying the situation to our community and having students do the research necessary to see what services were available.

- It was a brief scenario that provided significant applied, practical experiences for EI students.

- I thought the "community resources fact sheet" was a wonderful idea in instructing students to learn the local resources - concretely locating agencies, speaking to the proper staff person, and obtaining the required information (or realizing there were no resources!).

- Really liked the group assignment on identifying community resources. It's an activity that we could do with our EI staff. Very realistic and quite practical. Excellent activity for students to begin getting an idea of what service coordination is all about.

**SUNSET VIEW**

- This case could be used to highlight several concerns that are critical in training students. The students we train are often involved with DCFS (Department of Children and Family Services) and foster care families. I can see this story being utilized as a great organizer for discussion on the difficulties of reacting to and dealing with emotionally and legally with family safety issues, for the dilemma of bringing up bad news and suspected concerns to parents. A great case!

- Discussion questions - thorough in terms of examining situation.

- The questions and topic are extremely important . I would ask further questions such as what would you do if you were in a rural area where home was 25 miles from any town and no woman's shelter?

- Realistic case. Used it in a workshop. Generated much discussion.

- Good introduction to some real issues in home visits.

- This case story has many tricky issues to discuss. It would be very easy to adapt questions to the skill level of trainees.

- I found the study questions to be particularly useful with this case study.

- This is one of the few cases that could be generalized to use by regular early childhood educators. Above and beyond special needs, they too deal with the issues of abuse, hot lines, and home visits.

- This was a well written, realistic case study. It should facilitate much discussion among either preservice or inservice audiences.

- Addresses issues that are very relevant to our university population which is located in an area of minority Hispanic and low SES population that is plagued by the problems of a violent society. This case study would stimulate much discussion.

SILENT PARTNER

- Addresses some difficult dilemmas that are likely to actually occur at some point during one's early intervention career. This will be very helpful in preparing the students, probably most helpful with entry level.

- The story is very descriptive; perhaps it could be shortened without loosing effectiveness. We rarely have an opportunity to provide case studies prior to the workshop dates; therefore time is a factor in using case studies. Re: Discussion Questions: With inservice groups, participants could identify the issue, prioritize them by establishing criteria, and suggest optional courses of action. We have used several of the earlier case studies. They provide and interesting and beneficial format for participants to explore important issues and develop strategies. Thank you for your efforts.

- These have been quite meaningful for many folks that we have worked with. It provides an objective account to initiate discussion that draw upon thought and/or experiences. Often,

the more diverse the audience (e.g., disciplines, age groups, disability category) the increased breadth of the discussion! Thanks!!

- This is a story with a wide range of problems. The questions following are very exacting and could lead to some exciting discussion around the topic of ethics.

- I believe the issues Samantha faces with Angela's family, aside from the question of whether or not Roz took the money, would be appropriate for preservice (undergrad/grad) and inservice groups (entry level/moderately skilled) to discuss. My hope is that persons with combined training and experience in early intervention would not be as quick as Samantha was in passing judgment in assuming that Roz stole the money!

## RECIPE FOR RACHEL

- This was a fascinating story. We so often look at various syndromes from an etiology/deficit view that the day to day interventions are sometimes minimized.

- This case intrigued me. I thoroughly enjoyed reading it. Rachel and Samuel became real. I had less insight into who Sandy was (maybe because of her stoic qualities).

- This case study would be highly effective with nursing students. Also could facilitate other in identifying way to utilize school nurses to assist in intervention.

- I would link the case study with providing prior knowledge on Prader-Willi syndrome. Possibly have a resource person, either parent or medical come in, someone who has first hand knowledge with the syndrome.

- This story is a good example of confidentiality of speech. We need to always be aware of who we are, where we are when we are speaking.

## HAPPY BIRTHDAY!

- Very easy to read and quite realistic. There were a lot of issues to think about that were written into the story but not addressed specifically in the questions, i.e. the other team member's attitudes about Sachi and the gift of sushi. If participants do not respond to the issues through the questions, they should be probed. These are excellent examples of real-life issues that should be addressed and discussed.

- I think this case is more easily included in single discipline training, regardless of the discipline, because the issues are pertinent to all who work with young children and their families form many perspectives; case management, transition planning, knowledge of community resources, collegial support (or lack of it), parent-professional communication.

- Excellent discussion questions!

- The audience for this case study could vary depending upon the competencies that were emphasized (grad/undergrad; limited experience/moderate experience).

- This story did an exceptional job giving all sides of the story - families, professionals, and those caught in the middle.

- This case study presents issues regarding the role of the service provider in a challenging situation. In addition to all of the issues surrounding James' transition to public schools, there is the issue of peer (professional) support and the issue of administrative support. Could one of the discussion questions lead participants to address the importance of team decision making?

- Preservice level: This might be a good case to use in working with persons seeking an early intervention degree as a laboratory activity focusing on family centered care issues (questions 1 & 2). Inservice level: This case would be useful for administrative personnel as a means for facilitating increased interagency collaboration during the transition based upon P.L.. Study questions geared toward this audience might be useful. Also, Allison's gathering of the agencies' perspectives might generate role playing possibilities.

- This story presented very clearly how difficult it can be for professionals and parents to make decisions and that often "ideal" options are not always available.

- A great case to highlight transition planning. The study questions are excellent in assisting instructors to probe students and could actually be spin offs to assignments (especially question 13) for students to tackle at the EI (0-3 and ECE 3-5) levels.

## FAMILY FEUD

- I've used a few of the case studies as a group writing project in a graduate seminar in Child Language. The students were used to verbally discussing cases, and this writing task encouraged additional collaboration on their parts. It was a great experience!
- Enjoyable reading. Good role model - EI provider just being in a child care setting.

- I especially liked the questions that asked trainees to list steps (#3) to develop appropriate services.I have been piloting some of the case studies this quarter with a group of ECSC grad students (interdisciplinary: OT, SLP, SpEd, RegEd). This case prompted the most discussion yet about values, inferences, assumptions, preconceptions and their impact on our interactions with families.

**GRANDPA'S LAP**

- I feel the issues raised and the study questions are very relevant and important.
- If Lori's role as PT not so well defined, could adapt case study to more disciplines or if in the study guidelines, you interjected their roles- i.e., suppose you were a social worker assigned to this family, etc. - could increase use by other disciplines.
- A very well done case story, particularly useful for my class. The IEP is an excellent example of goals and objectives needed for a child with cerebral palsy. It is a privilege to be part of this project.
- Interesting to be exposed to center-based interactions and home-based interaction.
- I have a bias about sensitizing professionals to family issues and responses. This is an excellent case scenario for that purpose.
- The cultural issue should be addressed with this group as well as the process of the PT goals and objectives and follow-up case story of a conversation between the tow professionals may be insightful.

***A SCHOOL FOR SARA***

- I used this case as an intro. to Family Centered Care at our 1st. class meeting. I set it up as a tag team role playing situation where 1/2 of the students had read one role and the other 1/2 the other role. Two students started out the role play and then other students tapped either the professional or parent on the shoulder and sat down and changed players. A terrific activity to demonstrate different styles of both a professional and a parent. The students loved this activity. We began by doing a board diagram of the major characters first before the actual role play.
- Nicely developed case study but very narrow as could only be used appropriately by two fields for on. I could not use this case study with my students.
- This case study addresses a very important area of family centered practice. Helping professionals to see one child and intervention in the context of the family is often missed in trainings and inservices. This addresses it well.
- I like the role playing idea, but have found that to "loosen" students up, you may need to do.a model one first. I found an easy way to start was through the interview process having one student role play the parent of an atypical child and another one the S/LP obtaining the information.

- It's a very important case in order to emphasize the process of effective communication between the professional and the parents.

- This is a very useful case study for graduate students in Communication Disorders. It touches on many pertinent issues the students must know about in terms of etiology, developmental history, communication skill development, early identification and intervention, viewing the child in the family context, and working with parents. It will be helpful for me to use this case - especially in using the role play to identify and problem solve issues. It enables the student to take both the parent and professional perspectives. Thanks!

- Role play approach was a nice change from "Q & A" approach of other stories. Allows students opportunity to practice and experience both sides of the issue.

- This story could be used with all disciplines because the focus is on parent-professional communication and family centered care, even though it is specific to a hearing problem. I really like the role play activity and being able to give different students different perspectives of the same story.

- I believe the case study provides an excellent example of some troubles that professionals might encounter in early intervention. I believe that in setting up the role play some direction might be warranted (i.e., goal of meeting). The participants know their role, but might not know exactly where the meeting should go (increasing the use of hearing aids).

- This is a very common situation and thus a case study on it would be very usable. I like the options of a role play rather than a straight case study with study questions.

- "A School for Sara" is extremely well conceived and does an excellent job of revealing the perspectives of the parent and the professional. I really like having the two view points - having been a parent of an exceptional child. I feel that we really need to take into consideration what they are thinking and feeling. The role playing will be extremely meaningful to this scenario.

<u>PARKER ELLIS</u>

- Great story - very realistic.

- This is one of your best so far! The issues facing this professional and family are not pretty ones - the are REALISTIC. Even administrators should take a read of this one.

- This is absolutely the best and for me the most useful/relevant of all the case studies to this time. It's fantastic. Just what I needed.

- Was concerned because placement decision was made before meeting with parents. This meeting should be team approach, team including family. Adversarialy approach set up ahead of time - maybe that the point! Lots of possibilities for discussion. Realistic situation for folks like Dana.

- I think that the realities of Dana's life were well woven into the story. Service providers have their own lives and needs that must be recognized also. The case study is realistically presented with many real-life concerns & barriers described. Thanks.

- In addition to the excellent discussion questions, may want to include suggestions for how to improve this situation. This would be for the instructor only.

- I thought this was an excellent vignette and the questions it raises are ones ECI staff needs to think about and plan for. Thanks!

- ***AT THE CLOSE OF THE DAY***

- A very well done study. It will be particularly useful in my class - "Introduction to Young Children with Special Needs - Birth to age 8". The suggestions for role play are inspiring and the opportunity for exploring IFSP/IEP content and discussion is very valuable.

- Good activities. Nice variety for differing skill levels of trainees. The role play perspectives are valuable to add to many of the cases.

- This was interesting to read a follow up of a previous story. This gives an excellent view of a parent's perspective. The activities you have included are both great for preservice and inservice level groups.

- The activities were a great addition - enabling students to practice skills/competencies. I like how this story further elaborates the previous story about Rachel.

- This is an excellent case study. I like it very much.